



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ALAINA WYATT-DURK, DNP, FNP-BC		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: alainadurk1@gmail.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/6/2024 4:15 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

Good afternoon, My name is Alaina Wyatt-Durk, DNP, FNP-BC. I am testifying to show my full support for HB1773 and advancing the practice abilities of nurse practitioners in Missouri. I received my nursing education from University of Missouri-Sinclair School of Nursing, obtaining my BSN in 2006 and then my DNP in 2016. Prior to attending nursing school, I had obtained a Bachelor's degree from Truman State University in Exercise Science. My nursing background has been in family practice and orthopedics. Besides my professional experience in the healthcare arena, I also have a considerable amount of personal family experience being on the receiving end of healthcare here in Missouri. The main common theme that continues to occur for the constituents of Missouri is having adequate access to quality care. Many Missourians are without a primary care provider because of a myriad of reasons including providers retiring, providers moving to more lucrative areas, costs, and location. The average wait to get into a new primary care provider, that is actually taking new patients, can be anywhere from 4-6 months and I have personally experienced this recently after moving from Columbia to O'Fallon. We have a huge asset here in Missouri with Nurse Practitioners that is being underutilized and could help provide more Missourians access to quality healthcare. We have one of the best nursing schools in the country here in our state at Mizzou, each semester graduating high quality NPs, and many are leaving Missouri to go practice in other states that have Full Practice Authority. Missouri has created legislation for "Assistant Physicians" to practice in underserved and rural areas, to help with the need for access to care. Therefore we, as a state, are aware of the need. The biggest barrier for us NPs to practice in these underserved areas is having collaborating physicians (CPs), who are in the proximity and able to meet the current collaborating rules. Many NPs personally have to pay their CPs to review their charts, provide collaboration and meet the required rules Missouri has in place. This alone has kept me from returning to my hometown to practice because I did not have a CP to oversee my practice. Last week I sent an email to each member of the Emerging Issues Committee providing personal examples of when a nurse practitioner has provided exceptional care to myself or members of my immediate family. To me, these examples speak volumes for the quality of care NPs can provide. We are trained to analyze the current research and provide evidence-based practice. We also are very well versed in knowing when a patient may need to be referred on to a specialist. Nurse practitioners have excellent patient satisfaction scores and on average have more time to spend with the patient addressing their needs. We can help improve the health of Missourians. Let's stop being ranked 39th in the nation for health. A change is needed and was needed years ago. There are currently 27 other states in the US that have some version of Full Practice Authority in place. Let's make Missouri number 28. Thank you for your time and service to our state. Alaina Wyatt-Durk, DNP, FNP-BC



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: AMY M. GIBBAR		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: agibbar@chestnut.org	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 2:37 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Please support expanding the ability of APRNs to practice in the state of MO. I have a child who almost went without medications because of the restrictions that returned following COVID. My child was able to get the help needed during COVID, but it then proved very difficult to find someone when restrictions returned. I have private insurance so likely have it easier than others with Medicaid. APRNs must receive a state and federal license, please allow them to use these licenses to their fullest, without restrictions in what or where they can prescribe,



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: AMY MARIE HEITHOFF		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: heithoffamy@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/2/2024 1:50 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

The key to healthier Missourians is affordable healthcare with Nurse Practitioners! I'm a Nurse but not a Nurse Practitioner and I love every one of them that I've ever had the privilege to see. They spend more time with patients than Physicians do, they dig deeply into the causes and explain a wide berth of ways to become well, stay well and prosper. I've learned so much and greatly appreciate the intensity and thoroughness with which they practice. Nurse Practitioners would be the first to refer to a Specialist if needed. Please approve this bill and improve the lives of thousands of Missourians! NP's tend to practice in rural and lower socioeconomic areas that Physicians won't. Other states have done this very successfully; so should Missouri!



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ANGELA SABBLUT, DNP, APRN, PMHNP-BC		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: asabblutr@att.net	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 7:41 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I am a Missouri resident and Advance Practice Registered Nurse (APRN) who is currently practicing in the state of Illinois, a state who has already passed into law something similar to the aforementioned Bill 1773. I have been practicing for almost a year. I would like to go on the record as a supporter of this bill. Having a collaborative practice arrangement during the first 2,000 hours of my career provides a valuable resource to me as I gain experience which only serves to benefit my patients. Once I gain this valuable experience, being able to practice independently without a collaborative practice arrangement will enable me to better serve the communities in which I live and work. This bill is the best of both worlds - full independent practice vs. restrictive collaborative practice agreements with no expiration date.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ANN FREIHOFF		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: mfreihoff@sbcglobal.net	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 8:37 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ARNIE C. "HONEST-ABE" DIENOFF-STATE PUBLIC ADVOCATE		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: arniedienoff@yahoo.com	ATTENDANCE: In-Person		SUBMIT DATE: 2/7/2024 11:59 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ASHLEY MAKOWSKI		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: ashley.makowski@outlook.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 8:51 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

We must allow nurse practitioners to practice at the fullest scope of their license to help bridge the health care gaps many constituents of Missouri face. I support this bill.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: BENJAMIN J TRAVLOS		PHONE NUMBER: 573-893-1400	
REPRESENTING: MISSOURI FARM BUREAU		TITLE: DIRECTOR OF STATE LEGISLATIVE AFFAIRS	
ADDRESS: 701 S. COUNTRY CLUB DRIVE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65109
EMAIL: ben.travlos@mofb.org	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 6:51 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

Missouri Farm Bureau has member adopted policy that reads, "We oppose more restrictive supervision rules for physician assistants and/or nurse practitioners. We favor expansion of nurse practitioners' and physician assistants' authority based on their qualifications."



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: BETTY MITCHELL, DNP		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: blonglifebetty@aol.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 8:18 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am supporting the removal of the collaborative agreement for APRNs in Missouri who have practiced under a collaborative practice agreement for 2,000 hours the right to practice independently. Also, APRNs to prescribe pharmacologic and non pharmacologic therapies and scheduled drugs independently.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: BEULAH JOSHUA		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: beulahjoshua.jo@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/2/2024 1:38 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

House Bill 1773 states that an Advanced Practice Registered Nurse (APRN) who has been in a collaborative practice arrangement for a cumulative total of two thousand documented hours (one year) with a collaborating physician, shall not be required to enter into or remain in a collaborative practice arrangement to practice in this state



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CALLIE BALLENGER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: stiles_callie@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 9:54 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am providing supporting testimony in favor of HB1773 that would develop a transition to practice plan for APRNs with only requiring a Collaborative Practice agreements for Nurse Practitioners for the first 2 years or 2000 hours of advanced nursing practice. Nurse Practitioners are educated to diagnosis and treat medical conditions. As part if this education we are taught when to ask if assistance or transfer patients to a higher level of care. Allowing nurse Practitioners to practice to the full scope of their education would help increase the number of health care providers in the state of Missouri and decrease wait times for patients to receive helathcare.Callie Ballenger, MSN, APRN, FNP-BC, NPD-BC



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CAROLYN J TUCKER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: whnpcjt@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 5:29 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As an experience NP of 28 years, I have a knowledge base and experience greater than some of the physicians I am forced to collaborate with in my field. This is prohibitive for patient care as these inexperienced physicians have changed or stopped my plan of care resulting in poor outcomes. Additionally, in these 28 years, I have never had a complaint from my patients about the care I provide to them. Alternately, I know my limitations and when to refer. Experience teaches that. I am in favor of doing away with collaborative arrangements, but only for experienced NP's.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CARRIE CHASTAIN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: carriemckennon4@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 5:23 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

It will help access to care, some Nurse Practitioners are leaving for Kansas where their training and expertise is recognized with full practice authority creating even more access to care problem for Missourians. People receive quality and safe care from APRNs etc. Being a cancer survivor I have seen many doctors and mom of five I actually prefer Nurse Practitioners on the average because they take time to tell you the issue, what can be done and help you understand how to care for the sickness instead of just prescribe and move on



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: CHANTEL DANCY		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: lovemovies5@aol.com		ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 6:55 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I'm in support of HB 1773 bill for advanced nurse practitioners for the state of Missouri. The state of Missouri is in dire need of change. Twenty-eight other states have Full Practice Authority and none of them have removed or reversed the statute to go back to a collaborative agreement. Overwhelming physicians with more nurse practitioners to supervise is not the solution. Adding a mileage restriction has made the problems worse. The 75-mile, and 200-mile rule for Correctional facilities is very outdated and needs to be removed completely. I don't believe there is any other state that has a mileage requirement. We need FULL PRACTICE AUTHORITY NOW for experienced nurse practitioners. The states that surround the state of Missouri either have full practice or require so many hours of experience to get Full Practice. We need to change old, outdated statutes that have been preventing patients' access to care. We continue to see closures of hospitals and clinics across the state limiting patients from access to care. We are losing our nurse practitioners to other states.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: CHELSEY BYERGO		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: chelsey.byergo@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 9:58 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I am a nurse practitioner in St. Joseph, Missouri. I go to 4 group homes and provide care to approximately 100 patients. Abruptly, my collaborating physician decided to retire giving me 30 days notice. I frantically started looking for a new collaborator but without one I can no longer practice. The "Risk Management" department of Mosaic Life Care who employs the provider I have asked to become my collaborator has yet to decide if he can collaborate for me. These group home patients have trouble with transportation and truly lack motivation to go to doctor's appointments. Many of my patients are battling mental illness and drug addiction. I go into the home to provide chronic care management and I am availability by phone 7 days/week for acute issues. All of that is about to come to a screeching halt. Over the last two and a half years, I have reached out to my collaborator twice regarding patient care. I'm not saying I know everything, but I have been competently providing care without him. In this day and age nurse practitioners have incredible resources at our fingertips. Up-to-date, epocrates, and various journals guide my practice. I'm so disappointed that I may have to stop treating these patients and I am fearful they will not get the care they need. Supporting this bill will increase access to healthcare and allow populations such as this to be treated in their home rather than the ER. This reduces the burden on our hospitals and frees up hospital resources for those who truly need them.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: CHRISTINA JARRELL		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: taja456@hotmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 10:33 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

Think they should be able to treat patients with out having to pay doctor.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: CHRISTINA PETERS		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: christytice1981@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/2/2024 5:40 PM	

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I am a hospitalist NP in rural missouri. I want to offer my support. I am currently one of the hospitalist at this facility and passing this bill will provide more access to care. Since being in my position our overall score card has improved in addition to clinical outcomes, quality metrics, reimbursement, and antibiotic stewardship. I was asked to step out of my role because a couple of the board members wanted a physician only. All of the quality metrics and patient satisfaction decreased once I left. After a few months I was asked to come back to the hospital setting. NP's are very capable of providing great care. We are caring and compassionate. I even help my fellow coworkers when they can't get an iv in a patient or need help placing an NG etc. I was a critical care nurse for 10 years before becoming a nurse practitioner in 2014. I love my fellow physicians however I feel it is time for missouri to make a change. Physicians and NP always collaborate with specialist etc and removing our restrictions won't change the fact we do what's best for the patient and obtain second opinions If needed. What this bill will do is allow more NP's to stay in Missouri. Many NP's wish to be Independant such as myself. I am licensed in a neighboring state with full practice authority. Our inpatient hospital is only staffed by nurse practitioners at night with only an ER physician. If it was not for nurse practitioners, we would have difficulty providing night coverage for our inpatient population. It is very difficult to get physicians to come to rule health.Thanks so much for your consideration and support.Dr Christina Tice/Peters DNP, APRN, FNP- BC



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: CINDY LYNN HOLLIS-KEENE		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: cynthiahollis@yahoo.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/5/2024 8:12 PM	

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

Hello, my name is Cindy Hollis-Keene, and I am a dual-boarded advanced practice registered nurse who has practiced as a nurse practitioner in Missouri since 2010. I want to practice to the full extent of my education and take care of Missouri residents as I want to care for the rural and underserved areas in our state. However, I cannot do this or even volunteer in such places due to the restriction on my practice with the collaborative practice agreement. The costs I would incur to have a collaborative physician even allow me to volunteer my time/service to care for the underserved would cost me more than \$1500-\$3000 per month. Currently, I work in an adolescent psychiatric hospital where I continue to see the rise in mental health issues in children and teens in our state. Just today, Governor Parsons reported he was to focus on reducing suicide and mental health concerns without our state, which is precisely how the APRN specialty could assist with this. Many other states have allowed paths for APRNs to have TTP or Transition to Practice, which has resulted in improved state outcomes. Did you know that over forty percent of Medicare patients receive care from APRNs? Additionally, our practice restrictions were lifted during the COVID-19 pandemic, and NO adverse outcomes or issues were noted. Missouri's APRNs are working and collaborating with cardiology, nephrology, pulmonology, and all other specialties when needed without a collaborative practice agreement. Thank you for taking the time to read and consider my comments, and I hope you will consider support for the Missouri TTP Transition to Practice bill. Cindy Hollis-Keene, DNP, PMHNP-BC, FNP-BC



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CINDY MCVEY		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: Mcveybc2021@outlook.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/4/2024 6:40 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am urging you to support this bill to address Missouri's Healthcare crisis. It will not cost the state any money and it would lower Healthcare costs when residents can get the care they need rather than waiting weeks or months to get into a primary care provider. My mother is at risk of losing her primary care provider because her NP that knows all about her cancer treatment is losing her collaborating physician due to retirement. I am scared that her care will be disrupted simply because of regulations that don't have anything to do with safe patient care, but everything to do with power and control at the legislative level. I am pleading with you to consider my story. I am effected personally on both sides of this issue. Simply allowing NP's to work to the level of their training will save lives in many counties across our good state. The collaborators I have had have asked me why I can't practice on my own and why they have to sign my charts. This also tells me that this is not needed if even the physicians are questioning the reasoning. The physicians do appreciate getting a percentage of my income though. In my opinion this is the only reason they are fighting this requests of NP's across the state. Thank you for supporting MO families in allowing them the choice to see whomever they choose to provide basic care to them.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CLAUDIA K MARCUSSON		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: marcussonck@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 9:40 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.
It is time to allow these professionals to do their job without unneeded supervision.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: COLIN STUART CAMPBELL		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: csc3533@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 10:22 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

My name is Colin S. Campbell and I am a nurse practitioner living in a small rural town in Missouri. I have lived in the state of Missouri since I was 4 years of age. I have always been passionate about caring for others especially in rural settings such as in Missouri. I decided to pursue my passion of caring for others by completing my degree as a nurse practitioner. I presently work in a small rural health care facility located in Warsaw, MO providing health care services to those in need. I feel it is my obligation to report to you the news that Missouri citizens are hurting due to their limited access to health care services due to their geographic location and provider-physician shortages. As a nurse practitioner I have been trained to provide many of the essential health care services that patients require, but I am still limited due to collaborative practice agreements. I have had the opportunity to see the difference which can be achieved when barriers/restrictions are lifted and/or adjusted. I implore you to please consider the passing of bill HB1773 as doing so will provide the citizens of Missouri greater access to health care services.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CONRAD BROWN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: cnrdbrwn208@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 10:25 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a spouse of an APRN, I see firsthand how engaging the scope of practice would be beneficial. APRNs are held to such a standard, they are capable (and already expected) to make appropriate decisions in care of their patients. Enhancing their scope of practice not only benefits the Practitioner, but also the patients they serve.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CORRINE SMITH		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: Corrine.noelle@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 5:55 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I support this bill as a current, practicing APRN in the state of Missouri. If HB 1773 passes, I will be able to utilize my education and licensure to the full extent they were intended for. As well, I would be able to provide more affordable care for patients and help to emphasize preventative measures to reduce the costs of health care in our nation. Several states have enacted full practice authority for APRNs, and I implore you to do the same.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CYNTHIA HECK		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: covntkeeper@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 8:28 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Please vote to allow APRNs to practice to the full extent of their training. Patients need us. Lack of access to care in MO is significant. Even in populous areas the demand exceeds availability. I am a PMHNP and it can be 3-4 mo before a patient can be evaluated. Some NPs have collaborators with less experience than they, but still cannot practice without an MD. The time spent from MD auditing charts could be spent seeing more patients. Medical professionals value collaboration and will cont to do so but requiring it for experienced APRNs is limiting for all. I fully support required collaboration for new grads. 2,000 hrs is reasonable. Please pass this bill, for the health of Missourians.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: CYNTHIA HOLLIS-KEENE		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME: PERIMETER HOSPITAL		TITLE: PRIMARY PROVIDER	
ADDRESS: 1000 HOSPITAL DRIVE			
CITY: WAYNESVILLE		STATE: MO	ZIP: 65583
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: DARCI FEIDEN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: feidend2@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 1:15 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am a family nurse practitioner in rural Missouri. We face barriers to healthcare on a daily basis. Many physicians do not want to enter rural primary care, and this is where we can fill the gap. However, we cannot fill this gap if we are not allowed to practice to the full extent of our education and license. It has been shown time and time again that nurse practitioners provide excellent and safe care. Barriers were removed during the COVID pandemic with good results therefore, there is no reason at all why those barriers should have gone back into place. We provide holistic care and education to our patients which is why many patients choose an NP. Full practice authority would allow us to provide what Missouri needs most, quality, safe, holistic healthcare.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: DEBORAH JANE BLINZLER		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: Blinzlerdj@centurytel.net		ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 2:06 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

My Testimony, My Story• My Name is Debbie Blinzler, I have practiced as a registered nurse for over 30 years in Missouri. The last 7 years, I served as an Advanced Practice Registered Nurse, or APRN. I served as a Family Practice Provider in my Rural Southwest Missouri Community with an awesome physician and team. We provided quality care with awards for highest quality measures in our Medicare population. • I went back to further my education in 2013 after multiple friends, church family, neighbors and community members would contact me for advice on their health concerns each time yet another physician would leave our community. I chose the University of Central Missouri for their Family Practice Program. • The Institute of Medicine, currently the National Academy of Medicine expressed concern over healthcare crises as early as 2010 and called for solutions, even at that time, it recognized the great opportunity for nursing to meet needs, offering ITS Vision that Nursing be allowed to step up and practice to the full extent of our training. • Since that time, there has been a 50% growth with Nurses stepping up, furthering education and training, so that today there are 15,000 APRNs in Missouri; 15,000 Advanced Practice Registered Nurses trying to help improve access and quality of care. But our hands are tied by the strictest regulations in the United States. So, we are losing many APRNs to surrounding states because those states have full practice authority. •

First: my God given calling is nursing. Define NURSING: the profession or practice of providing care for the sick and infirm, the promotion of health, prevention of illness and care of the ill, disabled and dying. • Second: Some physicians say we are practicing medicine. Define Medicine: The field of health and healing which includes nurses, physicians and various specialists. The art or science of preserving or restoring health often using drugs, interventions or manipulations. Sounds similar. • Nurses and physicians have worked hand in hand since roles were defined. Physicians needed us, we needed them. It has been collaborative teamwork. We have been their eyes forever. But we were not allowed to diagnose, meaning we could see an egg, recognize and describe it in detail, but we could not call it an egg, and we had to call physicians who would name it an egg, and for orders to treat it. After recognizing and describing it for years, calling for years, they created guidelines, if it looks like an egg, treat it like an egg and follow these instructions. After years of recognizing, describing and treating we completed further education and training to be able to call it like it is and treat it correctly, following the same evidence-based guidelines they follow. Yes, we follow the same standards and guidelines they do. • I didn't have any issues initially with having a Collaborative Practice Agreement. But That agreement defines and limits what we can and cannot do, including prescribing, diagnosing and treating patients. My first difficulty arose when my collaborator was going out of state. In Missouri there has been a mileage limitation. I learned our back up physician was also not available, but our new Clinic manager told us it was ok. I asked her to get that in writing, and she scrambled finding us another back up for the next morning so that we didn't have to cancel our patients. You see, it was my license on the line, and we would have been seeing patients illegally due

to the mileage restriction. My second difficulty arose when I received a new collaborator. I had completed the same training as physicians for the procedure to place Nexplanon birth control. I had successfully completed that procedure many times over the previous 5 years without incidence. My new collaborator was not trained; therefore, I was no longer allowed to place it, which meant I now had to refer my patients elsewhere. Another concern arose when I attended training on opioids and Buprenorphine. You see, I had never carried my DEA or BNDD to prescribe, and had no plans to get them, because our providers didn't recommend it. I didn't plan to prescribe but I saw patients on those meds and wanted to learn more about those meds and how they interacted with all other meds and treatments. Physicians in my practice told me I did not need to be there taking the training. But my training is my choice for my patient care. Finally in 2022, I lost my collaborator. Without a collaborator, I cannot see or treat patients. My patients were literally devastated. I live in that community and became an APRN to serve my community. I still get stopped at the store, church and gas stations asking when I will be back. What they need to do for their health concerns. I was approached again just today. But I can I do is tell them they have to find another provider. • If I were able to find an independent collaborator to work with me in the area, I would have to pay him \$1000-\$2000 monthly for that CPA agreement. • There are currently less than 12,000 physicians in Missouri, this includes ALL specialties, subspecialties and anesthesiology, and that number is not expected to improve much over the next 10 years. Not near enough to meet the demand! Especially when some health systems further limit the number of collaborations a physician can have. It will take all of us working as a team to meet the needs of Missouri. APRNs have been practicing in smaller numbers for over 50 years, a half century, with safe, high-quality care. • Missouri continues to drop its rankings each year, compared with all other 50 states on multiple Healthcare scorecards for access and healthcare outcomes: 36th in access to care; 40th in quality; 41st in public health care; 41st in women's health care; 42nd in maternal mortality; 34th in infant mortality; 42nd in outcomes; 47th in primary health care; and 49th in mental health care! There are too many healthcare deserts without providers; 36% Missourians live in a HPSA Healthcare Shortage Area. We continue to see small hospital closures, 15 in the last few years! This greatly affects rural health care. Ask your constituents about their care! • Today 27 states plus DC (Utah and Kansas passed most recently) allow Full practice authority under their state board of Nursing, and EACH state has proven HIGHER quality access and outcomes than Missouri. The MISSOURI VA even allows independent practice because of the physician shortage. 40% Medicare patient receive their care from NPs, the fastest growing group of providers. Several other states have Transition to Practice, TTP, for the New APRNs before Full practice authority, with still yet HIGHER quality outcomes. We are not opposed to transition to practice. 40% Medicare patient receive their care from NPs, the fastest growing group of providers. • When restrictions were lifted in Missouri during Covid there were NO concerning healthcare issues that resulted. • We already readily and easily collaborate with cardiology, nephrology, pulmonology and all other specialties when needed without a collaborative practice agreement. We would continue to do the same with our physician counterpart, even without the CPA. It is imposed by the physician and/or system to control and limit our practice. • Physicians and big healthcare oppose APRN FPA because they want control. They say it is because we are not as educated but we are educated and trained. We are not trying be physicians. We practice to our training, we have advanced pharmacology training, acute and disease management training and we continue training for specialization as needed, such as procedural training. The Missouri Board of Nursing Began setting training educational standards as early as 1909 with the initial Nurse Practice ACT, and it continues to update those standards for care. Many of us have years of Intensive, Emergency healthcare experience prior to furthering our advanced formal education. Our 6-8 years of formal education compares with other professions like optometrists, pharmacists, dentists and lawyers. Our 10-30 years of previous experience surpasses the 3-4 years of residency a physician receives. • OUR PRACTICES AND OUTCOMES SPEAK FOR THEMSELVES...IF NOT SURE ASK YOU CONSTITUENTS and our PATIENTS!!!



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: DEBRA K SIMS		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: Dks5937@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 1:15 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am a practicing Women's Health nurse practitioner in Missouri. I have been in nursing for 40 years and a full time nurse practitioner for 26 years. I am in support of the bill to no longer requires collaborative practice contracts to practice in Missouri. I practice autonomously under 7 doctor practice and provide expert care to women of all ages without direct supervision but within the laws of collaboration in my state. I would very much like the support of the State Board of nursing to support this bill, as well as the state of Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: DENISE PITTS BLACKBURN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: dpblackburn@hotmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 7:11 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

As a longtime resident of Missouri, born in St. Louis, and a lifelong RN and APRN, I support this bill. I am witnessing the devastating cost of our healthcare crisis in this state. It is a higher price than we have to pay. This bill will help to reduce this human and monetary price tag by allowing Nurse Practitioners to provide their evidence-based, safe patient care without the regulations that strangle it. It will entice nurse practitioners to work in Missouri rather than a neighboring autonomous state, as many are doing due to these restrictions. Our state-wide healthcare shortage requires more providers, like nurse practitioners, to take care of our citizens. Please support HB 1773. Thank you



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: DEREK LEFFERT		PHONE NUMBER: 573-280-8500	
REPRESENTING: ASSOCIATION OF MO NURSE PRACTITIONERS		TITLE:	
ADDRESS: P.O. BOX 104853			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65110
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: DOUG SPARR		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: dl_sparr@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 10:26 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a voting constituent who grew up in rural MO with friends and relatives that are still living in rural MO, passage of this Bill is VITAL to keep healthcare access available to ALL MO residents. There are not enough physicians that are available and willing to fill all the gaps that currently exist in rural healthcare. Rural clinics have closed recently as the Board of Healing Arts continues to push it's outdated and self serving agenda at the expense of rural MO constituents. This Bill's passage would help ensure adequate medical care is available throughout all of MO, not just the large cities where the physicians' seem to gravitate towards. These APRNs are more than capable of providing the care desperately needed in throughout MO.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: DR. LISA CROWLEY DNP, MBA, PMHNP-BC		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: lcrowley14@yahoo.com		ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 9:45 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I, Dr. Lisa Crowley DNP, MBA, PMHNP-BC am in full support of adopting full practice authority for nurse practitioners to practice to the full extent of their education, and training. The Missouri structure of restricting practice for nurse practitioners is outdated, oppressive, and harming Missouri citizens. My daughter lost her provider, who retired. There was no one to take the providers place and thus my daughter lost her ability to receive care, including life saving prescriptions, as there were NO providers available to take new patients. This scenario is a common scenario in Missouri, as are the healthcare deserts in Missouri that so desperately need providers. Charging nurse practitioners to pay a physician every month as a supervisor only lines the pockets of the physicians, many never even read the charts, they simply do not have time, as they are busy trying to see as many patients as they can see in a given day. The last thing they want to do when they have down time is keep working. It is beyond human capacity, the workload forced upon physicians, and nurse practitioners can help fill this gap of care, for those in healthcare deserts and beyond. Nurse practitioners are well educated and have the skills necessary to provide high quality care, and scientific evidence, research, supports this. People can say whatever they want but the evidence supports nurse practitioners giving high quality care. Let's work together as physicians and nurse practitioners, without imposing outdated restrictions on nurse practitioners, a regulation that only hinders and harms care for Missouri citizens. Over half the states in the US have already granted full practice authority. Please do not trail behind, our people, our citizens need us, and can depend on us to give high quality, compassionate care!!! Think about them, our citizens, put their needs first, that is what the boards do, let our government be in alignment with putting our people and their needs first. We are the Show Me state. I know you care! Show me how you care!!!



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: EILEEN PHILLIPS		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: phillipsfamily4him@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 6:23 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.
In full support of this bill as a registered nurse in Missouri



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ELIZABETH ROLWING		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: erolwing@live.com	ATTENDANCE: Written		SUBMIT DATE: 2/5/2024 12:58 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: EMILY MYERS		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: emily.myers@ssmhealth.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 3:23 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I support this bill to increase access to care for Missourians from Advance Practice Registered Nurses (APRNs). This bill entrusts APRNs with the quality of care they have long provided, but removes a barrier to further the reach APRNs can have in the health and quality of life of Missourians.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: FELICIA WYATT		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: butler_felicia@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 7:03 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: HEIDI FIELDS		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: hwfields@prodigy.net	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 7:40 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

All statements in HB 1773, including elimination of distance-based practice (proximity rulemaking) for advanced practice registered nurses (APRN), as well as elimination of the requirement to enter or remain in a collaborative practice agreement with a physician when the APRN is in good standing and has a cumulative total of 2000 documented hours with a collaborating physician.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: HOLLY C MATHIS		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: hollyanp@yahoo.com		ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 3:43 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I have been a board-certified nurse practitioner for over 20 years. In this time, I have had 5 collaborative practice agreements (CPA) with an equal number of physicians. With each position a CPA was entered into, with a 30-day collaboration time. Thus, I have had 150 days or 240 work hours (using an 8 hour day) spent in direct collaboration with a physician. A normal work year consists of 2080 hours, or 260 working days over those 20 years. This new bill (HB1773) increasing the requirement to 2000 hours or 250 working days promises to increase the amount of time spent in direct collaboration with a physician at the beginning of an NPs training when it is most needed, as well as prevent future unnecessary time spent when an NP changes collaborating physicians after becoming an experienced clinician. Additionally, most physicians continue to mentor the NPs with whom they work and NPs continue to collaborate directly with physicians when needed, further contributing to the expertise of the NP. I fully support this proposed change. Holly Mathis, DNP, APRN, ANP-BC



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JAMES HECK		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: jbcrheck@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 8:47 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Passing this bill will strengthen health care for all Missourians.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: JAMIE HECHT		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: jle9476@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 12:58 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

My name is Jamie L Hecht, MSN, FNP-BC and am in full support of adopting full practice authority for nurse practitioners to practice to the full extent of their education, and training in the state of Missouri. The current structure in our state restricting practice of Nurse Practitioners is outdated, dismissive of the healthcare we are able to deliver, and harmful to the citizens of this state. Many areas of this state are healthcare deserts which is not only damaging to the patients in regards to their health, but also financially as they are forced to travel for healthcare. The lack of care accessible to them also directly correlates with an increased prevalence of chronic diseases that is a burden to the state economically as well as financially. At this time Nurse Practitioners are charged a fee to pay physicians to sign off on charts that quite frankly is just a way for many Physicians to line their pockets further without actually reviewing the charts. Is it a wonder, they are fighting for us to not have Full Practice all while touting it is for the good of the patients? What is for the good of the patients is having access to quality healthcare and physicians cannot fill the massive void we are facing while they try to take it all on alone. Nurse practitioners are well educated and have the skills necessary to provide high quality care. Research and scientific evidence supports this. Thus, why over half of the states in this country have moved to allow Nurse Practitioners to practice at the fullest extent of their education and training. The continued restrictive nature in this state is causing and will continue to cause a shortage of providers as Nurse Practitioners leave Missouri to practice in FPA states. I, myself could travel 15 miles into the state of Illinois and practice independently, but my capabilities apparently are less, according to those who oppose FPA, within 14 miles of my home. Please put the healthcare of Missouri citizens at the forefront and SHOW US Missouri can and will take care of its own.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: JAY HARDENBROOK		PHONE NUMBER: 816-810-2066	
BUSINESS/ORGANIZATION NAME: AARP		TITLE: ADVOCACY DIRECTOR	
ADDRESS: 4031 PARKER AVE			
CITY: ST. LOUIS		STATE: MO	ZIP: 63116
EMAIL: jhardenbrook@aarp.org	ATTENDANCE: In-Person	SUBMIT DATE: 2/7/2024 2:58 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: JEANNE, ELAINE WIGGINS, PSYCHIATRIC NURSE PRACTITI		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: jwigginsmhnp@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 12:59 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

My name is Ms. Jeanne Wiggins. I reside in Fulton, Missouri, a rural town that recently lost their long standing community hospital. I have been a Psychiatric Nurse Practitioner & Clinical Nurse Specialist for 17 years, a psychiatric nurse for 27 years and a Perinatal Mental Health Provider. My background includes substance use disorders, Veterans, forensics, community, and perinatal mental health. I currently work within substance use disorder clinics, community mental health clinics, and an inpatient substance use treatment program providing psychiatric services to three counties. I am also the Nurse Practitioner Liaison to the Midwest Society of Addiction Medicine. I have worked at VA Medical Centers in Illinois and Missouri. I am active within the medical organization, the Midwest Society of Medicine (MWSAM), which is a branch of the American Society of Addiction Medicine (ASAM). I am also active within national and state chapters of the American Nurses Association (ANA), American Psychiatric Nurses Association (APNA), American Association of Nurse Practitioners (AANP), and the International Society of Psychiatric Nurses (ISPN). While receiving my education, I was inducted into the Alpha Iota Chapter of Sigma Theta Tau International Honor Society of Nursing. I hold degrees from Central Methodist University, Columbia College, and the Sinclair School of Nursing at the University of Missouri-Columbia. I have taught nursing and related subjects at Sinclair School of Nursing at MU, Columbia College, Moberly Area Community College, Central Methodist University and Missouri State University. I would like full practice authority. However, if transition to practice is what we can receive, this would be a step in the right direction. More people died from drug overdoses last year than any year prior in the history of our great nation. We are at a critical nursing and provider shortage, psychiatric included, throughout the United States. Mental health needs are not being met in underserved areas or in minority populations throughout Missouri. Perinatal mortality rates are far above that of their counterparts. Suicide is still a leading cause of death in the United States and far too high within our entire population but particularly our younger population at this time. Some Missouri nurse practitioners are required to pay their collaborative practice providing physicians out of pocket fees of up to \$4500 a month while others rely on companies to cover the costs of these fees. This subject does not appear entirely about patient safety. There appears to be a financial, controlling aspect to this, in which non-physician providers are forced to pay exorbitant fees just to provide healthcare to Missouri citizens. I could not make it to testify today because I am seeing patients at my clinics. I see hundreds of patients on my caseload at three different rural Missouri towns. One single missed day of work for a healthcare provider, fireman, or law-enforcement officer, has far greater consequences than other professions. I must choose my days off carefully, as not to affect the care of extremely vulnerable populations who are already struggling. Iowa has had full practice authority since 2008. Every state surrounding Missouri has full practice authority or transition to practice. We are not competitive with other states. We are losing nurse practitioners as they simply prefer to work in other states where they do not pay collaborative practice providers for redundant supervision. They do not

have unnecessary, antiquated, and redundant levels of collaboration. I implore you to consider supporting nurse practitioners to receive transition to practice legislation that has existed in states such as Iowa since 2008. I would further add that while I work substance use disorder clinics I am far too aware of the death toll fentanyl is having with the citizens of Missouri. Last year, more Americans died from overdose deaths than any year in the history of our country. We must stop antiquated regulations that impede our progress on the fentanyl epidemic in this country. Daily we see patients struggling with substance use disorder who seldom use only one substance as they grapple with addiction. There are approximately 15,000 nurse practitioners within Missouri. Add the costs for collaborative practice providers. If each collaborative practice provider carried the full amount of allowed collaborative agreements, which is five at this time. Then calculate how much that is adding to healthcare cost across the state, you would need to acknowledge that this is not entirely about oversight. Thank you for your time and attention in this matter.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JILL	PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:	TITLE:	
ADDRESS:		
CITY:	STATE:	ZIP:
EMAIL: jill.cacciabando@ssmhealth.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 10:39 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am a family nurse practitioner who has practiced for almost 19 years and I support this bill 100%



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: JILL KLIETHERMES		PHONE NUMBER: 573-280-2200	
BUSINESS/ORGANIZATION NAME: MO NURSES ASSOCIATION		TITLE: E.D.	
ADDRESS: 3340 AMERICAN AVE, STE. F			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65109
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JOANN FRANKLIN DNP GNP PMHNP FAANP		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: Franklindnp@gmail.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/4/2024 8:35 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I support HB 1773 because it will expand healthcare throughout the state and free up physicians to be able to see more patients. A transition to practice for Advanced Practice Registered Nurses will allow them to practice fully after a 2000 hour commitment in a collaborative practice arrangement. Missouri lacks enough healthcare providers in all counties for psychiatric care and all but one for primary care providers. There is also massive issues in child and maternal health that has to be corrected. This transition is a trend across the United States because of the decrease of physicians being able to meet the demand of increasing patients. The aging of American has begun now with baby boomers annually increasing and being classified as geriatrics. This also allows citizens to choose care providers closer to home, plus can decrease wait times for care, decrease travel costs and bring care more local to patients. This will address the disparities which have caused Missouri very low national rankings in many measures of health care while other states with Advanced Practice Registered Nurses being allowed to meet the needs of patients has boosted states rankings to the top. This is a extremely progressive action to improve Missourians access to healthcare and improve health status all over Missouri. There is no downside to implementing HB1773.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JOANNE SCHAUMBURG		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: jonischaumburg3114@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 6:39 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I support 1773



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JOHN ARMBRUSTER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: jarsak01@yahoo.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/4/2024 10:46 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

How else can we move forward to provide better access to care for Missouri citizens? There must be a solution to allow more providers to stay in this state by allowing certain providers to practice to the full extent of their education and training. By approving a transition to practice for nurse practitioners, a step forward will be made in rescuing Missouri from being in the bottom 10 states with poor access to care for its citizens. Bill will not cost the state government and will address the continued attrition of healthcare providers moving out of state to practice due to legal restrictions to practice. Thank you.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JOSHUA DAVID KELLEY		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: joshuad.kelley@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 7:35 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I am in full support of HB1773. Rural communities in Missouri need more access to care. This bill will enable that.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JULIE ASCHE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: jaasche@hotmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 7:34 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KARIN RIEPE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: kriepe@aol.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 9:21 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am in full support of HB 1773 to allow nurse practitioners to practice to the full extent of their education and expertise. Nurse practitioners provide high quality health care in all settings of health care. They serve in many health care deserts in this state. Multiple studies show the care provided by nurse practitioners is comparable quality to physician providers with no statistical difference in patient outcomes.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KASEY ENDRES		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: kaseyendres@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 9:57 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Full practice for Nurse Practitioners is crucial for our healthcare system. We bring a unique experience in that we have better relationships, more personal and adaptable care, and gain a better understanding of the patient as a whole not just symptoms. This allows us to provide exceptional care. Missouri is one of the few states left behind in the ideal of advancing healthcare



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KATHERYNE TIFUH AMBA		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: katheryne.amba@ssmhealth.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 9:33 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am a nurse practitioner and Nurse scientist in Missouri. This Bill will help me practice to the highest standard of my abilities with more flexibility compared to current situation where geographic proximity rules are ridiculous.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
REGISTERED LOBBYIST:		
WITNESS NAME: KATHI HARNESS		PHONE NUMBER:
REPRESENTING: NATIONAL COUNCIL STATE BOARD OF NURSING		TITLE:
ADDRESS: PO BOX 2302		
CITY: JEFFERSON CITY		STATE: MO
		ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KATHLEEN CARTER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: kcarternp@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 10:15 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am an NP and I support this bill.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KELLY ANNETT SMITH		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: kas304@hotmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 9:53 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

Advance practice nurses receive a thorough and complete education far surpassing PA's, and are fully prepared to practice at the limits of their training. We need more independent primary care and family practice providers!



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KELLY MURAWSKI		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: kelly.murawski@ssmhealth.com	ATTENDANCE: Written	SUBMIT DATE: 2/3/2024 11:11 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: KELSEY KINGSBOROUGH PMHNP		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: klskingsborough@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/3/2024 6:00 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

Psychiatric mental healthcare in this state is in extreme short supply. In St Louis I am seeing countless patients coming to me from retiring and dying MD psychiatrists. We are getting worse and worse at preventing suicide. We are drowning in the need to treat these patients. This is not just a want, this is an emergency. The life and mental health and safety of our citizens over the next several years will depend on Psychiatric NPs and we will NOT be able to do what we need to do with the most restrictive practice that is in place right now. The gracious psychiatrist I collaborate with right now is crippled with just my collaborating and could not handle another NP. With independent practice and the ability to relieve our physician colleagues of our burdens as well as to be able to treat patients and prevent death and suffering we can truly make history and propel healthcare in Missouri into the future. It's time we work together. Psychiatric nurse practitioners can and will be there for our patients if we are allowed to be. The only thing stopping us is the barriers in the law.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KIMBERLY DOOLIN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: kimberly.doolin@citizensmemorial.com	ATTENDANCE: Written	SUBMIT DATE: 2/2/2024 3:51 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

My name is Kim Doolin. I have been a practicing PMHNP-BC since 2019. My collaborating psychiatrist is retiring in June and finding a new Collaborator has been extremely difficult. We are in a rural community and need as many resources as possible to properly care for our mental health population. I do not feel I was ready to practice independently straight out of my masters program but the years of experience have afforded me the time I needed to be confident in my decision making and appropriate medication management. I can not speak to the need for independence with family practice but the field of psychiatry is in desperate need of independent practice for PMHNP's. Universities are not graduating very many psychiatrist and those that are graduating do not want to come to rural communities. For the sake of our mental health population, I urge you to pass HB 1773.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: KRISTY LEE GUESS		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: kristyguessrn@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 7:57 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I believe that advanced practice nurses should be allowed to practice after cumulating hours to sign for their own patients as they see fit, the collaborators they use don't even see the patients they are signing for and so it makes literally no sense that these nurse practitioners require a physician above them to have to sign for them And so I believe that it should be allowed that nurse practitioners are granted the ability to sign for themselves, including all documented hospice patients because that is the one thing that is held back currently at this time for them in the state of Missouri



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LARA PENN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: lpenn0216@charter.net	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 10:32 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

"I'm an NP and I support this bill"



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LARRY JARRELL		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: larry_jarrell@ymail.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 10:11 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

In the smaller rural areas the DR's are not readily accessible and when they are they are only spending a limited time with you and the nurse spends more time with you. Most if the time you can get to see the ANP and they spend more time and explain your treatment and your medications and concerns.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: LAURA L KUENSTING		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: laura.kuensting@gmail.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/4/2024 5:41 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

Number: HB 1773 Date: 02-07-24 Witness Name: Laura L. Kuensting,
DNP, APRN, PCNS-BC, CPNP, CPEN, ADHD-CCSP Address: 1605 Horseshoe
Ridge Rd. Chesterfield, MO. 63005 Phone: 314-
882-2220 TESTIMONY Good afternoon. Thank you for the opportunity to speak to you in support of HB
1773. My name is Laura Kuensting and I have been licensed as a registered nurse (RN) for over 35
years and as an advanced practice registered nurse (APRN) for the last 30 years. I hold three pediatric
board certifications, an attention deficit hyperactivity disorder (ADHD) provider certification, and a
Bachelor of Arts (BA) in psychology with a Doctor of Nursing Practice (DNP) as my highest academic
degree. I am the retired director of the Post-Graduate Certificate (PGC) and DNP programs at the
University of Missouri – St. Louis. I currently practice as a pediatric primary care APRN with two
pediatricians in the St. Louis area. I am here today in support of the permanent deregulation of APRNs
with experience to enhance Missouri citizen access to care to a qualified, licensed health care provider
who can also provide needed prescription drugs to maintain health care conditions. Nearly half of our
5,000+ pediatric primary care practice consists of underserved children, some Medicaid, some sliding
scale self-pay. Currently I see a combination of well and sick visits, perform behavioral health
examinations, assist the pediatricians with seeing patients when they fall behind or their schedules are
full, perform follow-up on diagnostics, answer email and phone messages left by parents about their
children, and refill prescriptions (except for controlled substances). Despite being certified as an ADHD
provider, I cannot prescribe or refill prescriptions for those children needing stimulant medication for
control of their symptoms. Ultimately, the pediatrician must prescribe the recommended medication
and assume the burden of record keeping on the prescription drug monitoring program (PDMP).
Fortunately, the pediatricians in the practice trust my judgement and recommendations but this creates
additional steps in the process of caring for children, including increased liability for the physician. As
an experienced, qualified, and licensed health care provider, I should be assuming the responsibility of
assessments and treatment recommendations for these children, not the physician. I trust my training
and many years of experience. I am willing to accept this responsibility for ALL children I care for.
While the physicians and I consult with each other every day as we work side-by-side together, placing
an undue burden on the physician is unfair and can provide disruption in the care of a child. To
summarize, unnecessary requirements have regulated me and my physician partners. Access to care
is impeded when a child's stimulant medication cannot be filled in a timely fashion (e.g., the
prescribing physician is out of town or on medical leave). As an experienced, licensed non-physician
prescriber, the inability to prescribe stimulants for ADHD places an increased burden of responsibility
and liability upon the physician; undue stress on a parent whose child cannot stay focused on their
studies; undue stress on the classroom teacher who is trying to minimize the impulsive behaviors of a
child with ADHD, and most importantly, on a child's ability to learn and their self-esteem because they

cannot control their own impulses. In closing, the current regulations on APRN practice are unnecessary and, in some cases, disrupting when caring for young Missouri citizens. A permanent deregulation could improve access to care and will place the burden of responsibility on the licensed provider caring for a child, not just the physician. Sincerely, Laura L. Kuensting, DNP, APRN, PCNS-BC, CPNP, CPEN, ADHD-CCSP



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: LAURA THIEM		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: ljthiem@yahoo.com		ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 7:30 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I'm writing today to request that you support Rep. Chad Perkins HB1773. This bill provides a path to increase primary care providers in the state of Missouri. Missourians experience delays in obtaining health care appointments and care. The only areas with adequate numbers of providers are the urban centers. In Missouri, 109 of 114 counties are Health Professional Shortage Areas (HPSA), 103 of 114 counties are rural areas. Every Missouri county has a critical lack of psychiatric care. These are healthcare deserts due to lack of available healthcare providers. There are thousands of Advance Practice Registered Nurses (APRNs) that are ready to fill the gaps in these healthcare deserts. Currently, there are over 15,000 APRNs licensed in Missouri. Of those, 10,000 are Missouri residents. I am educated as a Doctor in Nursing Practice (University of Missouri-Columbia, 2016); Master of Science in Nursing, 1995; post-master's education in Psych 2006. My Advanced Practice Registered Nurse (APRN) board certifications include Family Nurse Practitioner (1996 to present), Adult Psychiatric Clinical Nurse Specialist (2006 to present), Adult Psychiatric Nurse Practitioner (2007 to present) and Family (Lifespan) Psychiatric Nurse Practitioner (2016 to present). I have practiced as an APRN in rural Missouri since 1996. My current practice is in Adrian, MO. Somehow I lose my knowledge when I practice in Missouri where I am required, by statute, to collaborate with a physician. I am licensed in Kansas, Nebraska and Arizona without that requirement. I could practice just over the Kansas state line (LaCygne, KS or just west of Drexel) but I would not be able to provide care to the most vulnerable Missouri Medicaid population that I currently serve. Collaboration occurs organically without statutory requirements. Thank you for your consideration. Laura Thiem (Licensed name Laura Chipman-Thiem)



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LAURELL CONDER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: laurellconder@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 8:46 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am an APRN currently working at a rural health shortage facility. I have been at this clinic for almost 5 years. In my practice I make all decisions for my patient's healthcare needs independently. I have rarely consulted my collaborators for decisions regarding my patients. In the rare event that I needed assistance from a physician they are a phone call away. Mid-levels are more than capable of practicing without a collaborative agreement. With technology and EMR systems there is no need to keep physicians within a certain mile radius or require collaborative agreements to practice or review a percentage of charts anymore.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LAUREN GORDON		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: barrett9803@hotmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 11:11 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I am an APRN practicing in Missouri and I have so many obstacles to my practice; it hinders my care. At times I have thought about moving to another state to practice. Please pass this bill!



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LAUREN HUNTER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: lhunter5814@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/3/2024 5:19 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I run two clinics in which I rarely ever would need my collaborator. It's just additional money in physician pockets while taking out of the NPs that are putting in the care and time with our patients. This is also a strain on opening practices in rural towns who need APRNs help. Collaborative agreements are a time of the past. Mo deserve to have more access to care.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LAUREN KNIGHT		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: lcrown85@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 10:41 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am a nurse practitioner with 11 years of experience providing high-quality, cost-effective health care to patients while in a collaborative practice agreement. I support this bill to allow experienced nurse practitioners the ability to deliver much needed access and care to patients in Missouri without the requirement of a collaborative practice agreement.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LAURENCE WILLIS		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: willis.laurence@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 1:07 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a a consultant, I have seen NP's across the state adopt statistically superior medication and practices over traditional methods. NP's provide patient-centric care resulting in higher quality of care as their foundation of training was to emphasize, care and provide hope. I support the bill to see qualifying NP's have more responsibility and prescribing authority.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: Laurie Sparr DNP, APRN, FNP-C		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: laurie_js@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 10:59 PM	

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I have 30+ years experience as a RN and the last 7 years I have been working as a Family Nurse Practitioner (FNP-C). I started working as a FNP in central rural Missouri with Central Ozarks Medical Center (COMC) a federally qualified health center (FQHC). I helped open the first school based health clinic in the Waynesville schools. During that time I provided primary care as well as same day care to teachers and their families as well as students and their families. The care I provided helped reduce the amount of time kids were out of school for illnesses and helped reduce teachers absences when they or their children were sick. I also provided physicals for students participating in sports and special Olympics allowing more kids to participate in sports and school activities. I also provided support for the school nurses. I was able to increase access to healthcare for residents in central MO during that time. I am currently working in behavioral health in IL in another FQHC. The differences in my scope of practice from MO to IL are significant as IL has transition to practice (TTP) regulations for APRNs. In IL, I have a physician that I collaborate with weekly. The physician lives and works in Chicago, we have a weekly Zoom meeting and she is available at other times as needed. I am also able to practice to the fullest scope of my license and prescribe Schedule 2 medications such a stimulants for patients, children and adults, in a safe, evidence based practice. This TTP in IL has allowed me to increase access to behavioral health care for IL residents to help improve their quality of life. I would like to provide the same service and increase access to health care for MO residents and improve the health of MO residents. I am asking the committee to support the APRN TTP bill to increase access to healthcare for MO residents and improve MO residents quality of life.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LEESA A. MCBROOM, PHD, APRN, FNP-C		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: leesa.mcbroom@uhkc.org	ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 4:05 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am writing in support of this Bill HB 1773. I am a family nurse practitioner and have been for 25 years. I practice in primary care and have been with the same collaborative physician for close to that many years . This bill will address the restrictions that prevents me from practicing in rural Missouri and expanding my practice. It will also remove the restriction for physicians who are only allowed to have three full-time nurse practitioners. Removing these barriers will allow more access to healthcare for Missouri residents. This bill will allow nurse practitioners to practice at the top of their license, like the Institute of Medicine has called for in the 2010 report called The Future of Nursing: Leading Change, Advancing Health. This concept was reaffirmed again in The Future of Nursing Report 2020-2030: Charting a Path to Achieve Health Equity, A Consensus Study from the National Academy of Medicine. There is 50 years of research evidence to support the safety and effectiveness of NP's delivering care. There are only 10 states, Missouri among them, with these restrictions preventing healthcare access and equity. Even Kansas has full-practice authority for NP's. Please support this bill to remove barriers that prevent Nurse Practitioners from more fully addressing social needs and social determinants of health and improving health care access, quality, and value.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LEILA FAY BUSBY		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: lfbusby@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 10:02 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Please allow this bill to pass!!



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: LINDA G ADKISSON		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: lggbrown@charter.net	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 11:39 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

Please be advised that as an experienced Advanced Practice Registered Nurse(APRN) working in Missouri as same since 1999, I am in complete support of House Bill 1773. This bill states that an Advanced Practice Registered Nurse (APRN) who has been in a collaborative practice arrangement for a cumulative total of two thousand documented hours (one year) with a collaborating physician, shall not be required to enter into or remain in a collaborative practice arrangement in order to practice in this state. It is my experience that the professional collaborative relationship with physicians and other healthcare providers is developed inherently in the shared goal of providing appropriate, safe, effective care to the residents of this state. Through time immemorial, physicians have consulted and collaborated with other physicians (both in their same field of practice as well as with specialists) without the expectation that there be a "written document" codifying expectations for the collaboration. By the same token, I as an APRN not only consult with/collaborate with the Collaborative Practice Physician in my practice, I also consult with and collaborate with other professionals based on the needs of my patients. I do this with the full support of my "collaborator". Those I consult with, provide me with the suspport, suggestions, information and often agree to see my patients if needed to assure appropriate care when their need exceeds my scope of practice. Additionally, in most instances, there is a financial burden placed either on the individual APRN or the practice in which they work due to the expectation that the "collaborative practice physician" will be compensated for the work of consultation/collaboration. Additionally, expectations of ongoing chart review add to the overall burden of work/documentation that actually does little to contribute to the quality of care that is being provided by the APRN. The majority of states have done away with this antiquated, paternalistic practice because time and practice has proven that while APRN's are not physicians and do not choose to be physicians, they still provide safe, effective, patient centered care based on their advanced education and training. I request that you support this bill and put an end to the regulatory burden which not only adds stress to individual practitioners but also adds to the unnecessary cost that does get passed on to the patient either directly or indirectly. Thank you in advance for your consideration. I would be there personally to attend/testify if needed but I am unable to leave my clinic unattended.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: LINDA METCALF		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: linda1metcalf@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 12:26 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I've been very pleased with my care



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LORI BLANKENSHIP		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: lblankenship@boothelcounseling.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 1:13 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As an advanced practice nurse since 2009, I have seen first hand the health care challenges rural residents face. Because of limited practice authority in our state, some of my colleagues have left Missouri to work in other states with full practice authority. In rural Missouri, limited access to care, gaps in health teaching on disease management, health coaching, prevention, etc, contribute to rising health care costs and hospitalizations. These gaps in health care access can be met by advanced practice nurses and independent practice would help retain nurse practitioners in our state. Please consider supporting full practice authority for NP's in Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LYNDA BANWART		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: lyndadiane88@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 4:40 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

When all levels of our healthcare team comp practice at their full practice authority, we are able to provide quality care for our fellow Missourians.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: M S DAWSON		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: rnprof2@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/2/2024 8:00 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Because I have 20 mentally ill patients scheduled, I cannot attend. Some of these clients I have followed for 10 years or more. Because of my commitment to these people-preventing suicide, working through the long dangerous process of addiction recovery, and salvaging lives from psychosis and severe anxiety-I stay in Missouri. Before coming home I practiced in Iowa, which has no practice or prescribing restrictions. I was safe and competent in Iowa, but in Missouri I need permanent collaborative supervision. As a psychiatric advanced practice nurse for many years, these restrictions in Missouri are demeaning and unnecessary.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MAGIN CHAPMAN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: maginchapman@hotmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 7:43 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

The care that I am able to provide to my patients in the rural health clinic that I serve in is top notch. We have so many patients in our community that would benefit from better access to care in independent practice clinics. Physicians within the health system I work are unable to collaborate for APPs outside of the health system which very much limits access to care. Independent practice would open doors for so many health disparities we see in the rural communities we serve!



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: MANDY HAGSETH		PHONE NUMBER: 573-636-4060	
REPRESENTING: MISSOURI FAMILY HEALTH COUNCIL, INC.		TITLE: DIRECTOR OF POLICY AND EXTERNAL AFFAIRS	
ADDRESS: 1909 SOUTHRIDGE DRIVE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65110
EMAIL: mhagseth@mfhc.org	ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 10:07 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MARCY MARKES		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: npsznwhz@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 5:59 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I have had to close 3 rural health speciality clinics because of limitations to practice as well as spend over \$4000 a month to my physician in order to practice. My children are now grown and I am considering leaving the state due to these restrictions



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MARGARET R BENZ		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: margaret.benz@slu.edu	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 3:49 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I am writing in support of HB 1773. We have a shortage of health care providers in Missouri, not unlike other surrounding states. What is different in Missouri is that we have a large work force of Nurse Practitioners that can help fill the need in primary and acute care to meet the access to care needs of Missouri residents, but we do not utilize available workforce to do so. Currently Missouri ranks 40 in health care outcomes, according to America's Health Rankings. Our surrounding states that utilize their Nurse Practitioner work force fully rank far better in health outcomes with Kansas ranking 29th, Nebraska 17th, Iowa 15th, Illinois 25th. In those states Nurse Practitioners can practice to the full extent of their education and training. The care in those states is more accessible, timely, has higher quality and is cost effective, saving the state money spent on the higher level of chronic diseases we see in our state. Patients seen in the VA often see Nurse Practitioners as the federal government changed to allowing full practice for Nurse Practitioners over 5 years ago as did the Indian Service Health System. Both of these federal agencies saw more timely care cost effective quality care equal to and at times better than their counterparts. There are more than 14,000 APRNs in the state of Missouri. Nearly 9,000 of them are Nurse Practitioners. 83% NPs see Medicare patients. 82% NPs see Medicaid patients. 88% NPs are certified in an area of primary care. 71% of all NPs deliver care in a primary care settings. 46% NPs hold hospital privileges. 11% NPs have long term care privileges. These Nurse Practitioners can be found in every county in the state of Missouri, though they cannot practice there because of outdated laws that require collaboration with physicians at a 6:1 ratio when there are no physicians to collaborate with. As a result, many Nurse Practitioner travel great distances to practice many crossing state lines to be able to see and provide the care they were educated and trained to do. Nurse Practitioners are all trained at the Masters or Doctoral level to assess, order diagnostic tests, Diagnose, treat (including ordering medication) and provide follow up care in a holistic approach to meet patients needs. All of them now are trained with at least 1000 hours of clinical time while in their programs and most continue to work providing care throughout their time in their graduate programs. All Nurse Practitioners are Board Certified and Licensed by their state. Nurse Practitioners enhance the care to the people of Missouri by providing accessible, high-quality primary, acute and specialty health care services while emphasizing health promotion, disease prevention, health education and counseling, guiding patients to make smarter health and lifestyle choices every day. Nurse Practitioners serve as the provider of choice for many Missourians and play a pivotal role in the health and welfare of our communities. As the number one trusted health profession, the confidence that patients have in Nurse Practitioner delivered health care is evidenced by the more than 1 billion visits made annually to Nurse Practitioners across the country. For more than five decades, research has demonstrated the high quality of care provided by NPs. Leading governmental and policy entities, including the National Academy of Medicine, National Council of State Boards of Nursing, National Governors Association and Federal Trade Commission, have taken notice of the benefits of

providing patients full and direct access to NP-delivered care. The research from these institutions demonstrate high quality care with excellent outcomes provided by Nurse Practitioners. The body of literature supports the care provided by Nurse Practitioners improves access to care provide care that is safe, effective, patient centered, efficient, equitable and evidenced based. Additionally, Nurse Practitioners care is comparable in quality to that of their physician colleagues, demonstrated by numerous studies that conclude no statistically significant difference across outcome measures. Research has found that patients under the care of NPs have fewer unnecessary hospital readmissions, fewer potentially preventable hospitalizations, higher patient satisfaction and fewer unnecessary emergency room visits than patients under the care of physicians. Regulatory Reduction for APRNs saves money and creates jobs in other states: There are both health and economic benefits to reducing barriers to advanced practice registered nurse (APRN) care. Missouri Quality initiative conducted by the University of Missouri demonstrated: 11-29% reduction in state health care costs and improved quality care. 50% reduction in unnecessary emergency room visits. 48% reduction in post-discharge hospital readmissions. 30% reduction in hospitalizations for preventable problems. This legislation would require Nurse Practitioners to practice with an approved preceptor for 2000 hours, then allow them to practice on their own. It does not expand the scope of practice for Nurse Practitioners. It does improve the ability of Missourians to be able to select the provider of their choice and may improve availability of a provider. Other states that have transitioned in this manner have shown over 3-year period Nurse Practitioners return to their rural settings and Access and Quality of care improve. Please support Representative Perkins legislation HB 1773 that will improve Missourians access to cost effective quality care. Sincerely Margaret R Benz, MSN(R), APRN, ANP-BC, FAANP



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MARGARET S FRIDELL		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: pfridell@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 12:12 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I support this bill.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MARY M. BRANT, PHD MSN LP PMHNP		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: mbrant@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 8:27 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a Psychiatric NP in rural MO I want you to know the gravity of our mental health crisis and the need to eliminate barriers to practice for NPs. Although I could drive 30 miles and practice independently in IA, I work here as a MO farm family member committed to my community because suicide and addictions are killing my neighbors. This bill can take down another barrier but does not compromise care. As NPs we are able to consult easily and are ethically bound to safe care as nursing remains as the most trusted profession. My colleagues and I collaborate daily as a team. Barriers to practice for rural NPs such as the now removed mileage restriction or cost and logistical burdens of collaboration agreements have limited access for our patients who deserve more. This bill can make a difference for access to mental health services where there are no onsite psychiatrists and so much need.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MATTHEW LINDQUIST, MSN, RN, PMHNP, BC		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: thew_man@msn.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 12:17 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Nurse practitioners relying on physicians for their livelihood prevents full access to the people of Missouri for qualified caregivers. I work in Psychiatry, and the entire state is considered a desert. I round at a hospital, and my collaborator has been indicted for events unrelated to the hospital, but as such he is suspended and may lose his privileges. I round with 4 other NPs. If he loses his privileges then all 5 of us will need to find a new collaborator to keep practicing there affecting the care of 80 inpatients a day. This is just an example of why untethering NP's is important.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
BUSINESS/ORGANIZATION:		
WITNESS NAME: MEERA SHEKAR, DNP		PHONE NUMBER: 314-614-4557
BUSINESS/ORGANIZATION NAME: CHANDRA SHEKAR MD		TITLE: APRN, FNP-BC, FNP-C
ADDRESS: 11040 MANCHESTER ROAD SUITE 1		
CITY: KIRKWOOD		STATE: MO
		ZIP: 63122
EMAIL: mshekardnp@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 6:53 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

In strong support of "HB 1773, filed by Rep. Chad Perkins, is a transition to practice bill that would grant APRNs in Missouri who have practiced under a collaborative practice agreement for 2,000 hours the right to practice independently. In addition to independent practice, the bill removes all requirements in collaborative practice agreements and specifically prohibits the Board of Healing Arts from promulgating any rules relating to geographic proximity. It also includes provisions to prescribe pharmacologic and non pharmacologic therapies and scheduled drugs."Kindly understand that this will reduce the burden on the collaborative physicians as well. Training for APRN ncludes practicing safe prescribing and following protocols, while advocating for the well being of patients. 1. Our Emergency Rooms have long waiting hours, exposing visitors and patients to sickness, while waiting for physicians.2. Urgent Care centers are closing due to lack of providers3. Rural Missouri population suffers due to lack of facilities as they are unmanned with collaborative physicians4. Our well deserving veterans are waiting to attain disability benefits as they are waiting for exams to be completed for APRNS with colloaborative rights.5. Across Missouri it seems like a simple solution to ease the burden and reduce burnout of overstressed physicians and make practicing medicine enjoyable.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MELISSA JARRELL		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: majarrn@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 10:04 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Getting health care in rural areas where we have very few physicians is difficult and even if they are there the patients see the APRN typically and build a relationship with them. The relationship that APRN's build with their patients is what makes these people doing what is necessary to keep themselves healthy and improving. I hear so many people complain about the physicians only spending 15 minutes or less with them and then not really explaining or discussing with the patient. The patient will then reach out to the APRN for clarification because they have spent the time with the patient. They are taught patient advocacy first and foremost. That is what the APRN's are trying to do but are not being allowed to.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MEMORY CURRY		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: mcurry1268@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 8:03 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I support HB 1773 because allowing full practice authority for NP's will open a pathway for rural areas in Missouri needing primary healthcare providers to meet the needs of many who do not currently have a primary care provider. The number one barrier to healthcare care in rural Missouri has been noted as lack of access to healthcare. The passing of HB 1773 would assist in creating more access to healthcare for these rural areas.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: MICHELLE GORTMAKER		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: michellegortmaker@gmail.com	ATTENDANCE: Written		SUBMIT DATE: 2/7/2024 7:15 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I am in full support of this bill as it will benefit the residents of the state of Missouri. So many people live in rural areas where advanced practice nurses can offer health care where there is a lack of physicians in the area.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: MICHELLE GRIMES		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: 2/7/2024 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: NANCY STEPANEK		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: n_stepanek@yahoo.com	ATTENDANCE: Written		SUBMIT DATE: 2/4/2024 9:25 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I have been an adult nurse practitioner since 2008 and a psychiatric nurse practitioner since 2118. I am currently doing mental health in a primary care office. I am still in need of psychiatrist to be my collaborative practice physician. We spent one year looking so far, we found one who would agree to provide the service for \$350 an hour. So I restrict myself to psychiatric interventions that would be appropriate in primary care to stay in my scope of practice. I am very good at what I do. I have so many resources at my disposal outside of research studies, Up to Date and others. I truly appreciate medical doctors and love having teams with both medical doctors and nurse practitioners on them. However, I don't need to have a contract and be supervised by them. I am accountable for my own care of my patients. I have focused on patient safety my entire career and I would not support this bill if I thought it would be a detriment to patients. This will allow better access to care for patients because the reality is that there are not enough MDs and DOs to care for all the patients that currently need care.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: OLIVIA JONES		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: oronnau@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 10:29 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I have been a Missouri Psychiatric Nurse Practitioner for over 10 years and have seen first hand the negative effects of healthcare provider shortages in Missouri communities. In order to meet the expansive mental health needs of our state, we need both physicians and nurse practitioners to be unburdened by the current restrictions. HB 1773 will allow physicians and nurse practitioners to devote their time to patient care and to practice wherever patients need to be seen. HB 1773 will allow patient serving organizations to expand services across the state. HB 1773 is a win for the people of Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: PAUL BACKMAN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: paul.backman@syngenta.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 6:09 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

Health care in rural Missouri is a critical issue. As someone who works professionally with farmers, it is becoming obvious that the situation is getting worse, not better. This bill offers an opportunity to start to correct that by leveraging the talents and education of advanced practice nurses and offer support of those so vital to the economic well being of the state.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: PETER GROCE		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: 2/7/2024 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: PRESTON HOLIFIELD		PHONE NUMBER: 479-426-8493	
BUSINESS/ORGANIZATION NAME: HEARTLAND ADVANCED PRACTICE NURSES NETWORK		TITLE: FAMILY NURSE PRACTITIONER, HAPNN PRESIDENT	
ADDRESS: PO BOX 806			
CITY: CAPE GIRARDEAU		STATE: MO	ZIP: 63702
EMAIL: president.hapnn@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 1:13 PM	

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

As a licensed Nurse Practitioner & Elected President of Heartland Advanced Practice Nurses Network (HAPNN) I share this testimony on behalf of myself & our organization which includes 46 licensed Advance Practice Registered Nurses (APRNs). We are in FULL FAVOR & SUPPORT OF THIS BILL. We will be having multiple members attending the hearing in person on 2/7/2024. With over half of the states exercising full-practice/transition-to-practice aurtherigty in the USA, & many more steadily moving towards towards these goals, as APRNs we feel strongly that this bill is a firm step in the right direction of allowing APRNs to practice to full extent of our license & training. Within our scope of practice, objective studies & data have demonstrated time & again that we are at least equally as safe & competent as our Physician colleagues in those respective areas. Additionally, studies have demonstrated in states across the USA that there is no correlation between Physician compensation & APRN practice authority. Unfortunately due to current Missouri legislation we are severely limited in our ability to practice & unable to practice to the full extent of our licenses & training. It is our humble request that you thoroughly & carefully review this bill & the non-bias statistics & data in hopes that you too will see that this bill is the answer to Missouri's healthcare shortages & needs. We thank you for your time & careful consideration. - Respectfully, Preston Holifield, FNP-C, HAPNN President



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: REBECCA JONES		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: nightbird573@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 8:08 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

My name is Rebecca Jones. I am a registered nurse and women's health nurse practitioner student in Clay County, Missouri. I am writing to request your support for House Bill 1773. Women in rural Missouri face many barriers to optimal health, including a lack of healthcare access. According to a recent report by the Missouri Department of Health and Senior Services, these women have higher rates of perinatal conditions, preterm birth, and low birthweight babies when compared to women in urban areas. This report also revealed that 42.9% of females in Missouri received late prenatal care because they couldn't get an appointment. During my career and time as a student, I've seen many patients traveling long distances from rural communities in order to obtain healthcare services. These patients are often late to initiate prenatal care and frequently miss prenatal visits due to geographical and economic challenges. Advanced Practice Registered Nurses (APRNs) can help bridge the gap and improve access to healthcare for rural communities in Missouri. Published research has consistently demonstrated that APRNs provide high-quality care and improve healthcare outcomes for their patients. Currently, APRNs have limited practice authority in Missouri due to the collaborative practice restrictions. Collaborative practice agreements can increase costs, decreasing the likelihood of an APRNs establishing their practice in an underserved area. Removing these restrictions will not worsen outcomes because APRNs routinely collaborate with other healthcare providers and specialists while caring for their patients. Laws and regulations for healthcare professionals exist to protect the public. However, regulations without the evidence to support them diminish public safety because they decrease access to care for those in need. Without such access, health outcomes diminish, and costs rise. Please support House Bill 1773 and help improve healthcare access for underserved communities in Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: RENEE ENDICOTT		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: reneednp@gmail.com		ATTENDANCE: In-Person	SUBMIT DATE: 2/4/2024 9:35 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I am writing to ask you to support HB 1773 by Chad Perkins (R)HB 1773 – Creates a pathway to full practice (also known as a transition to practice) for APRNs who have worked in a collaborative agreement with a collaborating physician for 2,000 documented hours. My desire to become a nurse started as a young child. I admired the nurse that gave me my weekly Allergy injections. My senior year high school I attended vocational school and went through the certified nursing assistance program. After high school I studied nursing in college and received a baccalaureate in nursing (BSN). I worked in several areas of nursing and after marriage and starting a family, I returned to college for a master’s in nursing (MSN) as a Family Nurse Practitioner (FNP). Then when both of my sons were in college, I returned to college for a 3rd time and completed my Doctorate in Nursing (DNP) in 2013. My entire life has been focused on nursing and the care of others. As a Family Nurse Practitioner, I have worked in many settings. I have worked on Family Practice, Internal Medicine, and Long-Term Care. Five years ago, I partnered with a friend and fellow nurse practitioner and opened a Direct Primary Care Clinic. This is a newer unique concept of healthcare. Members pay a monthly membership fee to have access to care. I would like to discuss our patient population. We have three types of patients. First, those who have good insurance and that are willing to pay our membership fee just to see us. Second, patients that have high deductible plans and it is cheaper to pay the membership fee to see us that use their insurance. Third, which is the majority of our patients. I call the “working poor” they have jobs but cannot afford health insurance due to the cost and earn too much for the expand Missouri Medicaid. If you are not aware of the high cost of health insurance, go to healthcare.gov and put in your age and see what you find. At my age it would cost over \$1,300.00 a month. I myself only have a major medical plan. We are meeting a need in our community providing healthcare reasonable cost. In the five years we have been open, we have diagnosed multiple individuals with: Type 2 diabetes, Thyroid disorders, High Cholesterol, High blood pressure and many other chronic diseases. In the US we tend to practice illness care not prevention. It is no wonder that Missouri Ranks 36th in access to care, 40th in health care quality. In Missouri 109 of 114 counties are Health Professional Shortage Areas (HPSA), 103 of 114 counties are rural areas. Every Missouri County has a critical lack of psychiatric care. That is why most patients with depression and anxiety are treated in primary care. Advance Practice Registered Nurses (APRNs) are ready to fill the gaps in healthcare in Missouri. Caring for the citizens of Missouri, your constituents. There are many outdated restriction on APRN practice and the biggest is the requirement of a collaborative practice physician. We have a collaborative practice physician who also owns a direct primary care clinic. We also have many other physicians that we collaborate with, and we collaborate with other nurse practitioners. I have the numbers of many specialists. The point is no one works in isolation. We pay for our own liability and malpractice insurance. This year our collaborate practice physicians’ malpractice insurance went up just because he was in collaboration with nurse practitioners. Because of the fear of losing him as our collaborator, we paid or the increase in his

insurance. And none of us have ever had any issues with malpractice. This was very scary, the thought that he would not collaborate with us, we would have to close our doors. In 2011 The Institute of Medicine (IOM) published "The Future of Nursing Leading Change, Advancing Health" In this publication the IOM stated, "Nurses should practice to the full extent of their education and training." Please support HB1773.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: RITA HORSTMAN		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: 2/7/2024 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: ROBYN SCHELP		PHONE NUMBER: 660-441-3260	
REPRESENTING: KIDS WIN MISSOURI		TITLE: DIRECTOR OF POLICY AND ADVOCACY	
ADDRESS: 3909 SHERMAN CT			
CITY: COLUMBIA		STATE: MO	ZIP: 65203
EMAIL: rschelp@kidswinmissouri.org	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 7:25 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

This bill would provide better access to health care for Missouri's children.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: RON MARKES		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: markesron@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 6:04 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: SARAH MCKEE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: smmnp08@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 7:44 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a family nurse practitioner and certified nurse midwife that trained in Illinois and lives in Missouri, there is a vast difference in our professional ability to practice. Missouri has not allowed APRNs to practice to the full scope of our ability. I have worked in rural clinics in Missouri, often we have struggled to find a physician to come into these rural clinics and to collaborate with APRNs. It has caused health care deserts in rural Missouri or caused practices to close. We the maternal health care crisis in this country, please pass full practice authority so that our CNMs can go into these rural towns and bring high quality health care where it is needed the most. This also applies to my other NP friends trying to offer mental health or primary care in rural Missouri, they too need access to these patients and not have to worry about closing a practice because they cannot find a collaborative physician.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: SHEILA KAY ARMBRUSTER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: sheila.armbruster@broadwayfamilyclini c.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/4/2024 1:39 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am in full support of HB1773. I live in Southeast MO and the small rural towns here need providers that are accessible to the many low income persons who lack insurance coverage or are underinsured. I have been an RN 37 years and a Family Nurse Practitioner for 9 years. I have had four physician collaborators. I evaluate, diagnose and treat patients with a myriad of health problems. I am familiar with my area specialists and many know me by name. I refer as needed. If I have questions, I call the specialists for advice. I feel as if I have a supportive group with which to interact. My patients are happy to see me. They stay in contact. I am not afraid of treating them. I have owned three clinics independently but due to cost of overhead and personal health issues had to close two of them. I needed to cut hours but overhead costs of collaborative practice are not decreased. It has been difficult to manage financially because of that ongoing weight. It would help me to help stabilize the business for my patients if that cost was eradicated.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: SUSAN BYERLEY		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: suzie.bee@hotmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/2/2024 4:22 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I have been an advanced practice nurse for 30+ years. Three times I have had to stop practicing because my collaborative practice physician retired or moved. How is this helping improve care? I now am required to have two different collaborative physicians as one doesn't see children. I work for a Federally Qualified Rural Health Clinic in a very rural area. Providing care is so important in these rural areas. Physicians are not willing to relocate to these areas making it difficult to find a collaborative. This bill would help with that.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: SUSAN KIRKLE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: shoppingatesue@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 4:05 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

To date, over half of US states and territories have adopted full practice authority for APRNs. The American Association of Nurse Practitioners policy brief cites the following benefits for full practice authority: Provides better access to care for patients living in underserved areas; provides full and direct access to patients beginning at the first appointment; cuts costs by avoiding duplication of billing and service costs and reduces unnecessary duplication of care services; and protects patient choice by removing anti-competitive licensing restrictions that get in the way of patient centered health care. (retrieved from <https://www.aanp.org/advocacy/advocacy-resource/policy-briefs/issues-full-practice-brief> on 2/4/24) On a personal level, I would like to be able to practice to the full extent of my licensure. Based on the points from AANP, a change to full practice authority makes sense for patients, APRNs, and the healthcare system. Thank you. Sue Kirkle



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: SUSAN M HINCK		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: SusanHinck@aol.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 9:32 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am Susan Hinck and I live in Springfield, Missouri. I support HB 1773 and SB 1058. Advanced Practice Registered Nurses (APRNs) in the United States have the education and skills for autonomous practice, without geographic restrictions and written agreements with physicians that prevent APRNs from providing care to individuals and communities throughout Missouri. As President of the International Home Care Nurses Organization and a Fulbright Specialist in the country of Lesotho, Africa, two months ago, I see the clinical leadership of nurses in many countries. Those countries that allow nurses to practice within their education and training have better health care quality outcomes. It is time to remove the arbitrary regulations that unnecessarily prevent APRNs from doing their jobs.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: SUZANNE PICHLMEIER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: slpichlm@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 11:10 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Upon completion of state education to be able to take boards for Registered nurse in mental in Missouri, that student handing practiced their profession under a collaborator for a minimum of 1 year successfully. After that one year they need to be allowed to work on their own without a collaborator.It would free up help for many a patient. Kansas and other states have less Stangent rith out 3



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: TAMMY BACKMAN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: ptbackman@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 6:06 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

Allowing advanced practice nurses to practice independently of supervision after one full year is absolutely what is best for healthcare in Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: TERRY EDWARDS		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: 42tedwards@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 1:05 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I support not only transition to practice for advanced practice nurses within Missouri, but I also support full practice authority as well.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: TERRY SHANNON THOMAS		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: Zeegendorf@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 4:27 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am writing in support of HB 1773, regarding Advanced Practice Registered Nurses. Any efforts to remove barriers to NP (Nurse Practitioner) practice have proven to be beneficial for patient care, requiring fewer unnecessary steps to get care to our patients, and increasing access to care. In a rural state that has whole areas with limited healthcare services available, this is one step closer to having improved access to high-quality healthcare. Unfortunately, Missouri is 42nd in national healthcare outcomes and with the closing of rural hospitals and practices where many NPs work, allowing a transition to practice of 2000 and then the ability to practice to the full extent of their education, would help to improve access to care. The American Association of Nurse Practitioners (AANP) has data that shows that in states where there are fewer barriers for NPs to practice, there has been an influx of NPs to fill positions and the healthcare outcomes have improved. The bottom line is patient access to care. Please consider supporting this legislation, HB 1773. Our neighboring States have already chosen to remove these barriers to NP practice. It's time Missouri moves forward to increase access to healthcare services. Sincerely, Terry Shannon Thomas MA, MSN, APRN, FNP-BC Family Nurse Practitioner
225 N. Maple Avenue Hannibal, MO 63401 575-921-1371



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: TODD ASCHE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: tasche326@hotmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 7:33 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I support Nurse Practitioners advanced practice



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: TONI KEEL		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: tonitiger30@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/3/2024 12:58 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

ARNPs can fill a crucial gap in providing care to Missouri residents, particularly those in rural areas where physicians prefer not to practice. As a long time resident of Missouri, I moved to Washington in order to practice independently and have been successful in doing so. I still collaborate with physicians and utilize resources in order to provide the best care possible. I am hopeful Missouri will allow ARNPs the opportunity to practice independently. My goal is to return to Missouri and provide primary and geriatric care in the rural community I grew up in which is Monroe County.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: TONIA NERINI		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: tonia.nerini2018@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/3/2024 9:29 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I am an advanced practice registered nurse. I have been practicing rheumatology with an aging population of rheumatologists. Currently, I travel to 4 different clinic locations due to the gap in access to care and an increasing shortage of rheumatologists. My collaborator had had to increase his clinic availability due to other rheumatologists recently retiring (he is almost up years old). At this point, the geographic restrictions would make it impossible for me to be able to see rheumatology patients which does significantly impact their health, well being, and could even result in severe health consequences to some of these autoimmune patients. I have been practicing for over 5 years in rheumatology. I also practice in Iowa with independent practice authority, which has significantly improved access to care as well as patient health and well being. As the rheumatologists continue to age and retire, I foresee rheumatology patients having to travel to larger cities which for most in this area would be at least a 4 hour drive or more. The absence of rheumatologists and nurse practitioners being unable to provide rheumatology services due to outdated regulations imposed on us could create more hospitalizations, ER visits, and directly will have a negative impact on the image of medical professionals in surrounding communities. I feel lifting all restrictions and allowing independent practice for nurse practitioners is a positive step in the right direction to positively impact our patients lives.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: VANESSA WELLBERY		PHONE NUMBER: 314-531-7526	
REPRESENTING: ADVOCATES OF PLANNED PARENTHOOD OF THE ST. LOUIS REGION & SOUTHWEST MISSOURI		TITLE: VICE PRESIDENT OF POLICY & ADVOCACY	
ADDRESS: 4251 FOREST PARK AVE			
CITY: ST. LOUIS		STATE: MO	ZIP: 63108
EMAIL: vanessa.wellbery@ppslr.org	ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 7:12 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: VICTORIA SANFORD		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: sanfordtori0@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/3/2024 6:08 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Missouri would not be the first state to allow advanced practice registered nurses to practice independently. Allowing advanced practice registered nurses to have full practice authority would provide access to care and help bridge gaps where there is no healthcare for individuals in Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input checked="" type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: YVONNE SMITH		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: preferredfamhc@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 8:19 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.
I support the HB 1773 - Perkins - ADVANCED PRACTICE REGISTERED NURSES



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: ANDREW POST, DO		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: andrewapost@yahoo.com	ATTENDANCE: Written		SUBMIT DATE: 2/5/2024 9:18 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

As a board-certified family physician of 20 years experience, I have worked with several competent nurse practitioners. However, there are several independent nurse practitioners providing “functional medicine” and similar quackery in my community likely without much physician oversight. Such practices as unproven infusion/IV therapy for COVID-19 (and other ailments) bogus hormone treatments and inappropriate use of weight loss medications.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ANGELINA HEIN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: angelinaehein@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 7:36 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

As a medical student in my first year of training, I am terrified of being able to provide SAFE and ACCURATE medical care to my patients one day, however, I know that by the time I have finished my 12,000-16,000 hours of training under physicians throughout my post graduate training, I will be ready to do so. I believe APRNs are essential to healthcare but they do not have the post graduate training or educational background required for complete independent practice. At the end of the day, it's about patient safety, and allowing patients to see APRNs who are allowed to practice independently will only do more harm than good.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: AUSTIN BOLKER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: bolker@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 1:46 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Not enough training and oversight for the NPs will create an immense amount of patient care errors and possible death. NP's have no where near the training to take care of patients on their own with no supervising physician. Simply not enough knowledge to handle major issues. Would be irresponsible to do so. I am a current medical student and our education is much more vigorous specifically to handle these situations.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: BEN BACHAN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: sa212165@atsu.edu	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 6:17 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I am in opposition of this legislation due to my concern over outcomes in patient care. Giving APRNs the ability to practice without physician oversight vastly underestimates the extent of education and years of work in residency needed to properly care for patients, no matter the specialty. While APRNs have excellent practical and patient care skills, they lack training in the deep foundational understanding of anatomy, pharmacology, biochemistry, physiology, pathology, genetics, histology and others which help inform physician's clinical decisions. Giving APRNs the ability to practice independently of this insight will negatively impact patient outcomes and lead to higher patient mortality and improper interventions.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: BENJAMIN COOK DO		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: bcook@atsu.edu	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 7:36 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I strongly feel this bill expands past the scope of practice for APRNs. As a physician trainer for NPs, PAs, Residents, and medical students there is an appropriate amount of training that is set to allow each group to practice safely. There is a reason for the past 200 years that medicine has been standardized into medical residency training programs. This bill will also lead to higher healthcare costs as seen in other states that have passed similar bills. I am happy to continue to work with APRN to develop practice patterns and to see them move under the Board of Healing Arts to standardize medical care in Missouri. Please vote this down for the health of Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: BRIAN BOWLES		PHONE NUMBER: 513-634-3415	
BUSINESS/ORGANIZATION NAME: MISSOURI ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS		TITLE: EXECUTIVE DIRECTOR	
ADDRESS: 1423 RANDY LANE			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL: brianb@maops.org	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 7:47 AM	

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

We must stop trivializing expertise in our society. That is what HB 1733 does as it allows APRNs to practice medicine, not only without a medical license, but without the requisite education and training. In Missouri, to become licensed as a physician, one-year of post-graduate training (residency) is required. Almost all physicians complete a minimum of three years. APRNs complete none. Physician residency is accredited by the ACGME, meaning it is standardized with rigorous requirements regarding content, patient cases, and competency. APRNs complete nothing close to this. The 2000 hours of collaboration prior to independent practice for APRNs proposed in this bill is meaningless, especially since it also removes any geographic proximity – meaning the APRN and collaborating physician(s) may not ever be in contact with one another. No standardized training of any sort will occur, meaning no learning is occurring. This is the whole point of physician post-graduate training. Also, in accredited residency programs, the resident physician is directly supervised by experienced physicians ONSITE. 2000 hours of collaboration where a collaborating physician isn't even required to be onsite, is not training. To allow an APRN to practice medicine without a license after 2000 (less than a year) of collaboration, while a physician is REQUIRED to obtain 1-year of residency before licensure completely ignores and trivializes their expertise. Patients deserve more. Access to care is always cited as a reason to legislatively expand APRN scope, but nothing in this bill guarantees APRNs will go to areas that truly are underserved. It only guarantees that they can practice medicine without being fully trained to do so.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: BRUCE WILLIAMS, D.O.		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: drwms87@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 11:18 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am in opposition to HB 1773. As a practicing family physician for over 31 years, I had the opportunity to work with advanced practice nurses in my practice. I found they were very knowledgeable and excellent providers. However, these providers worked with me at the same location. If an issue came up with a patient, my partner or I were on site and could see the patient. This was reassuring not only for myself and my partner, but for the advanced practice nurse and especially the patient as well. I understand the issues with access in Missouri, however I feel there are more innovative ways to address these. I valued the collaboration I had with my team, but I am very concerned that would be fractionated if they were not practicing at my location. In addition, I am concerned about the 2000 hour limitation being proposed. Medical students spend 2 years on Clinical Clerkships as medical students. This is before they enter their residencies. Residencies are a minimum of three years and the residents are under supervision of resident faculty physicians. I am concerned this legislation would not only put the health of Missouri residents at risk, but dramatically increase health care costs (additional lab, imaging, consultant fees, etc.) to compensate for less education and experience



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CALEB LILES		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: lilecal44@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 7:52 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

As a medical student, I believe HB1773 would cause the medical field to take a step backwards in providing quality patient care. Medical providers (including physicians and APRNs) are held to a high standard not only by the medical community but also those who seek medical treatment. Providers make decisions daily that impact a persons' life. These decisions are well thought out and require critical thinking skills that are developed through hours of training. Physicians are required to complete 12-16,000 hours before they can practice independently and for good reason. The rigorous training a physician completes prepares them to treat a patient without guidance from another physician. This bill would allow APRNs to practice independently with 6-8 times less training hours but still be able to provide the same level of care as a physician. This doesn't make sense to me. The rigorous training in my future will allow me to confidently provide high quality care to my patients. In my current situation, I personally would not feel comfortable providing high quality care to patients after only 2,000 hours of collaboration with a seasoned physician. In medical school, I have learned a lot about diseases and the treatments involved. Clinical hours are where I will learn to think critically expanding on the knowledge I have already learned to confidently diagnose and treat my patients someday. Ultimately, allowing APRNs to practice independently with inadequate training requirements forces them to treat patients through trial and error with no oversight. This practice is concerning to me as it puts patients at risk for complications that could be avoided through more rigorous training or continuing collaborative practice. I full heartedly believe that requiring APRNs to complete only 2,000 hours before practicing independently will be a detriment to patient care across Missouri and create further distrust between medical providers and patients.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: CAMERON HERR		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: herrc1@hotmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 3:36 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

- Under this law, a nurse would be able to practice medicine independently with no post-graduate training. That is frightening and unsafe for patients at all levels. - Currently, Missouri PHYSICIANS are required to not only complete undergraduate studies, get into and complete 4 years of medical schooling with rigorous standards and testing, and then at least one year of post-graduate training before receiving a medical license.- Nurses could in theory get their RN degree within 4 years or less followed by 1-2 years of additional training (often online and via shadowing) to then obtain their APRN. By this law they could then begin to practice Medicine unsupervised. I have been a physician for 8+ years I can attest that the practice of Medicine is challenging. To allow unsupervised practice by advanced nurses is irresponsible and unsafe. - I would not want a flight attendant acting as the pilot just b/c he/she has 5+ years of experience being on planes.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CAROLINE GRACE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: carolinegrace@atsu.edu	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 4:39 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a medical student, I understand the value of working in teams to improve patient outcomes. If passed, this would give APRNs the ability of independent practice without a collaborating physician in Missouri. This is counterintuitive to a patient medical home model where collaboration among professionals is a requirement for optimizing our community's health. As future physicians, we are working hard for many years as students/residents so we can provide high quality care to our patients. Passing this could lead to inexperienced APRNs providing subpar care to patients, ultimately leading to bad patient outcomes and overshadowing the true value nurse practitioners contribute to care.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: CHRISTOPHER PAYNTER DO		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: paynter713@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 9:18 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I speak on behalf of myself in opposition to this bill. While I do recognize the potential inevitability of independent practice for nurse practitioners, I do believe that this provides the slippery slope in which anyone can practice medicine without being fully prepared to do so. While there are many who will do just fine, especially those who have been practicing for a long time, I do not believe 2000 hours is enough time compared to the time needed for a physician to be able to finally practice medicine. Efforts like HB 1126 (2023) and SB 801 (2023) were the exact steps to help ensure the future of physicians in Missouri and their patients and need to continue with incentivizing more physicians to stay in Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: DAKOTA RAY SHOEMAKER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: dakotashoemaker.11@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 5:43 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

This would be an absolute disaster for the citizens of Missouri. There are many nurse practitioner programs that are fully online and do not require any experience as a nurse. You would potentially have new grads with a two year program and 500 clinical hours have the same practicing rights as physician with 2 years of classroom learning, 2 years of clinical rotations within a multitude of specialties, and 3+ years of residency learning their specialty. There are many great nurse practitioners out there, and there are some that probably provide better clinical care than some physicians. But the educational standardization among programs is not there to ensure that every nurse practitioner is competently trained to practice independently.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: DAVID PULLIAM		PHONE NUMBER: 573-635-0830	
BUSINESS/ORGANIZATION NAME: MISSOURI ACADEMY OF FAMILY PHYSICIANS		TITLE: DO	
ADDRESS: 722 W. HIGH ST.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: DAVID TANNEHILL		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: dtannehill87@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 8:49 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Allowing independent practice for APRNs after only 2000 hours of collaboration would be equivalent to less than six months of physician residency training. Are we really going to allow APRNs to have LESS of a requirement than physicians? Additionally, every Missourian deserves physician-led team-based medical care. Allowing independent practice to APRNs will further fragment our already fragmented healthcare system.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: DONNA K MCCLUSKEY D.O.		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: medwoman@centurylink.net	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 10:01 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I'm in opposition because as a physician I have seen patients that have seen NP's and been treated over and over for a problem and not been referred on with missed diagnosis. Or their treatment plan has not been changed as per physician education to correct the problem they have presented. NP's training is not as detailed and lengthy as physicians leaving patient care at risk.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: DR. MICHELLE HELTON, DO, MBA		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: michelleh6511@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 9:43 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a practicing physician in rural Missouri, I have to speak in opposition to HB 1773. Eliminating the geographic proximity requirement for collaborative agreements is negligible at the least. Collaboration is the act of working with someone to produce or create something and in this setting would be to produce quality care for patients. Without a geographic proximity close to said physician, the level of patient care and quality will drastically decline. I have witnessed colleagues at the end of the day "blanket signing" all documents in their inbox sent by APRNs who practice even in our region and can only imagine how much more lax this idea will become if proximity requirements are dropped. The second part of the bill that greatly worries me is that nurses will be allowed to gain independent practice after just 2000 hours of collaboration. Practicing physicians require four years of medical school and over 10,000 hours of residency to provide quality care for your friends and family. All of these hours are spent in direct geographic proximity to more trained physicians. It would be irresponsible and reckless to think APRNs can learn to provide the same quality care to patients without direct proximity and with only a fraction of the hours. I urge you to reconsider this and think about the quality of medical care you want your friends and family to have access to in Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: EMMA COOPER, MD		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: etcooper0@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 1:40 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Allowing Advanced practice registered nurses to have fully independent practice after only 2000 hours of working under the supervision of a physician is a very dangerous idea. 2000 hours is less than one year of the standard residency training that physicians have to do to have a license for independent practice in Missouri and the entire nation. The standard family medicine residency training to have a license to practice medicine independently includes the following: 4 years of a licensed medical school, followed by 3 years medical residency (under direct supervision of a licensed physician) which consists of 40-80 hour a week work weeks (this means at least some where between 6240 hours - 12480 hours , or an average of around 9360 hours). It does not make any sense to have the requirements of an advanced practice provider to be independent require less hours under a licensed physician than that which is required for a MD or DO physician. If passed, this would lead to dangerous medical care and poor outcomes for the residents of Missouri. - From Emma Cooper, MD (I am speaking independently from any organization that I am affiliated with, these are my own personal thoughts and don't represent any organization I am affiliated with)



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ETHAN HUBER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: sa210780@atsu.edu	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 4:19 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

As a student physician in Missouri, I feel as though the passing of this bill would belittle my future profession and create extreme controversy in the current healthcare system. The question that must be asked is if this bill improves the healthcare provided throughout the state? While I understand the importance of access to healthcare, this bill would allow providers untrained in diagnostic care to provide potentially harmful treatment to their untrained differential diagnosis.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: GANNEN RINCK		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: grinck97@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 1:55 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

A resident physician, who must have minimum of one year of training post-medical school, in which we study for four years and obtain well over 3000 clinical hours before graduating, and in the one year of training typically have a minimum of 2000 hours acting as a primary physician in a chosen specialty (after which many of us still have knowledge gaps that are filled in the following 2-4 years before independent practice), these new guidelines for nurse practitioners are obscene and embarrassing. Nurse practitioner was a degree meant to lessen the burden of doctors and healthcare teams by using well-seasoned nurses who knew the ins and outs of what they do and, with extra training, could take away some of the workload, allowing physicians to spend more time with complex patients while still maintaining the number of patients able to be seen. What it has turned into in many instances is a degree-farm, taking new nurses money in exchange for increased practice scope, without the need for the thousands of hours of clinical and book studying that degrees like M.D, D.O, and P.A undergo. Ask any physician whether they would trust a N.P. picked at random to treat them or their loved ones, most I know would not. Every day there is a new story about a missed diagnosis, worsened prognosis, or other, caused by none other than nurse practitioners. I highly urge continued physician oversight of N.P.s to maintain a high level of patient care and public trust in healthcare in Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: GEORGE HRUZA		PHONE NUMBER: 573-636-5151	
BUSINESS/ORGANIZATION NAME: MISSOURI STATE MEDICAL ASSOCIATION		TITLE: DR.	
ADDRESS: 113 MADISON ST.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: HAILEY VANRONZELEN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: hailey.vanronzelen@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 6:10 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

As a RN-BSN and current second year medical student, I oppose HB 1773. I have been an RN for four years and have witnessed my classmates graduate from NP school. I have witnessed them shop around for their clinical rotation sites and gone into practice in a field unrelated to where they were shortly a nurse. The idea APRNs will be able to independently practice after 2,000 hours, which will likely be less than a year, is concerning. As a medical student, I will be going through 2 years of training working 40+ hours a week after 2 years of learning in the classroom. That will then be followed by 3-5 years of intense training in my field of study for 60-80 hours a week. By the time I am done, I will have passed 3 board exams and have to do continuous education courses. Any desire to specialize will require 1-3 more years of training under physician supervision. I am worried for my friends and family who may go to an urgent care only staffed by NPs with only 167 shifts of supervision. Having working in the healthcare for 8 years, I know hospitals like to go for the cheapest option and may not extend supervision or have more experienced staff on call if a APRN needs more help, especially in smaller communities. I chose to go to medical school to get the training to be comfortable in high stakes situations knowing I had years of support and supervision. Physicians and nurses will agree that most of learning medicine comes at the bedside and not the classroom. However the comfort of being taught the science of how and why things work in medical school was comforting compared to the nursing model of care I learned in nursing school. Unlike most physicians, I am not as worried about NPs seeing patients. I do however feel that there should be adequate training at the bedside. Like physicians, there should be multiple board exams and continuing education requirements. There should also be requirements for switching specialties. I also feel a physician should always be available to ask questions and discuss concerns with. I know the nurses want to care for patients, I just don't trust this legislation and the ways it could be implemented, leaving the most vulnerable populations at risk.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: HUNTER GENTRY		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: sa208688@atsu.edu		ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 4:18 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

As a current OMS II, I am writing as a direct witness to just the beginning of my years of training and experience I will complete before earning my degree as a physician. How could an APRN provide the same quality of care and demonstrate an equivalent depth of experience as physician to a patient. Nothing can replace the training medical students receive to care for patients and even after 4 years of medical school we will still be residents and “learners” from attendings an around us. It takes us 7 years at the least to be considered properly equipped for independent practice. Each healthcare worker makes a choice as to what they would like to train to be able to do. APRNs choose to do less years of school. They choose to train less hours. They choose to work with a physician as the job is designed. If APRNs want to act independently they should choose to back to medical school and prepare themselves with equivalent hours and time a doctor would if they would like to perform the same job. The lack of training will hurt patients in the end because nothing can replace time and experience.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: IVAN BAHAMON		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: Bahamonivan@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 2:39 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

Dear committee representatives. My name is Ivan Bahamon and I am a current second year medical student in Missouri. I am writing to express my opposition to the proposed bill HB 1773. Despite appreciating the valuable contribution of advanced practice registered nurses (APRNs) to our healthcare system, I strongly believe that granting APRNs independent practice rights, after just 2000 hours of physician collaboration, may cause significant consequences to patient safety and to the overall quality of healthcare in Missouri. There is a broad range of research demonstrating that patient care is best served through a structured physician-led collaborative approach. Physicians, with more than 10,000 hours of accredited supervised post-graduate training, play a central critical role in overseeing complex cases and providing expert guidance to care team members, including APRNs. The current collaborative approach prioritizes patient safety and ensures optimal outcomes for quality of care. Although APRNs possess specialized skills, they may not possess the same level of comprehensive medical knowledge and expertise as physicians. A requirement of just 2000 hours of minimally supervised collaboration does not provide sufficient practice and experience for medical providers to safely provide independent care for patients. This bill does not propose competency requirements within these 2000 hours, which may translate to variable experiences for APRNs within the proposed time period and may yield a wide range of providers with varying levels of competency. Currently, physicians undergo at least a minimum of a year of accredited supervised post-graduate training to obtain medical licensure. This bill proposes to permit APRNs to provide medical care with education and training requirements below those of even the minimal requirement for physicians. It is crucial to highlight that my objection to this bill does not arise from any uncertainty about the capabilities of nurse practitioners in providing patient care. Rather, it is to recognize the unique responsibilities that nurse practitioners and physicians fulfill within the healthcare sector. I believe that we would agree that it would not be acceptable to allow physicians to practice independently after just 2000 hours of training after completing medical school. A bill with more extensive standardized, intensive, and directly supervised training or practice requirements for ARNPs might be more appropriate. Although a bill like this may aim to increase access to health care in Missouri, including rural areas, many states where similar bills have been granted have not shown a significant shift of nurse practitioners to areas lacking access. If the state of Missouri is serious about improving access to health and improving the health of its citizens, thoughtful measures need to be considered to address reasons for the decline of healthcare providers in Missouri that include physicians, nurses, APRNs and the supporting healthcare workforce. I am grateful for your time and consideration regarding this topic and have confidence in your ability to make choices that prioritize the wellbeing of all Missourians.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JAROD MEECHAM		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: jp.meecham@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 5:58 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

While HB 1773 may appear to solve the problem of healthcare shortages in the state of Missouri, my concern is that it only does so at the expense of patients themselves. HB 1773 will not accomplish the overall objective of better healthcare, rather it would be sacrificing quality for quantity and the "appearance" of expanded healthcare in the state. Furthermore, the long-term consequences of this legislation would only further dissuade future potential physicians from medical school, as it would be far easier to complete a less rigorous program in nursing school instead. I encourage all to oppose HB 1773.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: JEFFREY D. DAVIS, DO		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: jeffreydavis@atsu.edu	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 9:23 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

As a practicing physician in Missouri for 23 years who graduated from a Missouri medical school and who has been involved in training medical students, nurses and physician assistants as well as participating in collaborative practice with multiple nurses including four (4) currently, this is a bad and dangerous bill for Missourians including the members of this committee and your families, friends and communities. The state of Missouri will not license a physician until she or he completes four years of medical school, two years of which includes clinical training or around a minimum of 4000 hours plus at least one year of residency (post-graduate) that has an 80 hour work-week limit for 50 weeks which equates to another 4000 hours and passes three levels of board examinations. Furthermore, most insurance companies won't credential physicians until they have completed their residency training and became board certified. In total this equates to closer to a total of 15,000-20,000 hours of clinical training. Why so much? To keep patients, like yourselves, and your family safe and for everyone to receive the highest quality of care. Nurses receive about 500 total hours of clinical experience in NP school. It also makes no sense to eliminate geographic proximity in the collaborative practice agreement. If this bill passed, a new nurse practitioner could come out and enter into a collaborative practice agreement with a physician in Kansas City, but start her or his nursing practice in the bootheel of Missouri for 1 year (2000 hours) and then be turned loose to practice medicine independently. With only nursing school and around 500 hours of clinical education in their training program. What a double standard?! Missouri would be making it easier for lesser trained medical personal to practice independently and continue to have more requirements for the more highly trained. Missouri requires physicians to complete 50 hours of CME every 2 years to continue to be re-licensed every January. This bill says nothing about that for nurses practicing independently. Finally, anyone practicing a healing art independently whether physical therapy, occupational therapy, massage therapy or medicine is regulated and licensed by the Missouri Board of Healing Arts. Why should this be any different for a nurse practitioner practicing medicine? If they are practicing nursing, then by all means, the nursing board should regulate them. But, if they want to practice medicine independently, they should be regulated by the BOHA. If this is to fix an access to care problem in rural areas, then this should only be allowed in designated rural areas based on population or lack of adequate healthcare providers. And, if a nurse would practice medicine independently, what would their specialty be? Cardiology if the 2000 hours were in cardiology? Neurosurgery (brain surgery) if their 2000 hours were in neurosurgery? Their schooling is only in primary care like family nursing or pediatrics or women's health. Shouldn't they be limited to that? Please oppose this bill for the safety of all patients in Missouri.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: JENNIFER ALLEN, MD		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL:	ATTENDANCE:		SUBMIT DATE: 2/7/2024 12:00 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JERRY HAMAN D.O.		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: drhamando@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/3/2024 4:00 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

Dr Haman, Kirksville, I have been practicing for 50 years this year and have been in the military over 25, if these were war veterans and seen terrible things I would say okay, but most have not.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JOANNE LOETHEN, MD		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: joaneloethen@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 5:53 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

To: Emerging IssuesRe: HB 1773 – Elimination of Collaborative Practice Agreements I am a primary care physician in Kansas City (District 26). Clinical obligations to my patients are keeping me from attending this hearing in person. I write in OPPOSITION of HB 1773 which would exclude physicians from the care of Missouri’s citizens. In my practice, I care for the sickest of the sick - patients of every age and every demographic. I also happen to work with outstanding advanced practitioners as part of our health care team. Never would I propose or support a policy that would eliminate nurses from a medical team. Yet, that is exactly what supporters of HB 1773 are proposing to do to physicians – to eliminate the medical expertise of physicians from the health care team. I support safe, effective, team-based health care for every citizen of Missouri – I imagine this committee does as well. If passed, this legislation would communicate that Missourians in medically underserved areas (primarily rural) deserve sub-standard health care – health care that does not include the involvement of a licensed physician. I suspect HB 1773 is being sold to this committee as a “solution” to health care access and physician shortages. If physician shortages and rural health care are the concern, let’s work on solutions which expand access to team-based care and preserve the quality and integrity of the health care Missourian’s deserve. Solutions like:-improving access to high-speed internet across every acre of our state to help lower the barriers to telehealth services by a health care team-optimizing pay parity for telehealth services that provide the same quality of care as those delivered in the office-expanding existing physician training programs in our state to embed trainees in the communities that are most in need – which will not only expand the number of physicians in our state, but also capitalize on the fact that trainees are more likely to stay where they train -becoming a state that attracts and retains medical student graduates so that they train in Missouri and stay in Missouri for practice-exploring ways to preserve our critical access hospitals and physician practices that are the core of health care access in their rural communities-enhance rather than eliminate collaborative practice agreements to help every health care team run as efficiently, effectively, and with the highest quality of team-based care that Missourians deserve. Let’s build a state health care environment focused on team-based care that becomes a model for every state in our nation. Not one that compromises the health care quality of Missouri’s citizen.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JORDAN LANE, DO		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: jordanlanedo2021@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 7:49 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

I have practiced as a nurse in the critical care unit in the past. Currently, I am a physician. I believe that by reducing the number of hours in clinical care and the proximity to a supervising physician required to practice independently will result in harm to patient care. There is a large gap in education and experience between physicians and nurse practitioners that makes all of the difference when treating patients and differentiating between uncommon presentations of a disease as well as the number of different treatment modalities. As many of you know, on the job experience is more valuable than any education. I have seen a growing number of nurses entering into advanced practice educational programs with little to no clinical experience. These individuals would then be able to practice independently with no oversight after only 2000 hours of on the job training. Contrast this with the over 10,000 hours of training needed before practicing independently as a physician. There will surely be differences in care and quite frankly, places patients, including members of your own families, at risk of harm. Aside from the thought of direct harm, disparities in medical care will continue to grow and worsen in rural areas. We will continue to see a decline in physicians who work in rural areas due to a higher concentration of independently practicing nurse practitioners (offering care that is more often not of the same quality). Let's compare this issue to pilots flying commercial passenger airplanes. Is it worth having more planes in the air but with higher risk of harm by lessening the number of hours that the pilot needs to be in the air before being licensed to fly those planes? If you would like to fly on those planes with a less than optimal pilot allow that to be your choice, but do not subject the entire population of our state to those risks.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: JORGEN SCHLEMEIER		PHONE NUMBER: 573-634-4876	
REPRESENTING: MO COLLEGE OF EMERGENCY PHYSICIANS, JEFF CITY MEDICAL GROUP		TITLE:	
ADDRESS: 213 E. CAPITOL AVE.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JUSTIN HAJICEK		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: sa207468@atsu.edu	ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 3:52 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

The team-based, physician-led health care model ensures effective and safe medical care for patients. As a medical student, I've had the privilege to learn from physicians, physician assistants, nurse practitioners, nurses, radiology technicians and many others that make up a health care team. Patients receive appropriate and effective care when teams function together. I speak in opposition to HB 1773 because it erodes the team-based approach to health care. Eliminating geographic proximity in collaborative agreements discourages communication that is required for patient safety. It is also important to recognize the unique skills that each member of the health care team brings to the table. Physicians undergo rigorous training specifically geared toward independent clinical decision making. HB 1773 underestimates the importance of physician-led health care for patient safety. After four years of medical school, physicians complete 11,000+ hours of direct patient care in one specialty of medicine. This volume is necessary to care for patients with both typical & atypical presentations. The proposed 2,000 hour requirement for independent clinical decision making underestimates the time required to develop this skill.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: JUSTIN WILBERDING		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: justinwilberding@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 3:13 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a physician as and as a medical director for a large healthcare system, it is my belief that APRNs function is most appropriate when collaborating in direct contact with another physician, not independently or by distal proxy with another physician. New evidence based reports show inferior outcomes and wasted medical resources for patients cared for exclusively by APRNs. While I do feel that they are an integral part of a team of individuals that treats patients, I do not feel that it should be done independently. This is based off of personal experience as being the head of peer review and president of allied health of a hospital.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: KATIE DAVENPORT-KABONIC, DO, FAAFP		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: Katie.Davenport-Kabonic@coxhealth.com		ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 2:40 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

As a graduate medical educator- a faculty physician of a family medicine residency- who trains physicians after the completion of 4 years of undergraduate medical school until they are competent and capable board certified family medicine physicians, after 3 years of structured, direct patient-care facing training under the oversight of skilled educators in the field of family medicine. I have strong concerns about the very low number of hours requested by nurse practitioners prior to establishing independent practice. 2,000 hours does not come close to the amount of hours resident physicians are required to complete prior to being considered able to practice independently as a "moonlighting physician"- which is practicing under their medical license in certain limited roles- after also completing a third level in standardized testing to verify medical competency. Resident physicians complete nearly 4,000 hours of direct patient-facing care during their first year in graduate medical residency training. These hours are also under very close oversight- in fact, in the very same hospital and clinic buildings- of seasoned physicians. This training structure is in place to ensure patient safety is optimized and the resident physician receives appropriate education and feedback in their professional development. From the perspective of a professional graduate medical educator, the request of independent practice after the completion of just 2,000 hours of collaborative oversight- whether near or distant- is completely insufficient to ensure safe and competent practices in the complex field of healthcare. 2,000 hours is not a comparable amount of training hours that resident physicians are required to complete prior to being considered to be able to practice independently.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: LANCER GATES, D.O.		PHONE NUMBER: 573-636-5151	
BUSINESS/ORGANIZATION NAME: MISSOURI STATE MEDICAL ASSOCIATION		TITLE: PRESIDENT - MSMA	
ADDRESS: 113 MADISON STREET			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: LEA WHEELER		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: lwheeler471@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 4:36 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LIAM BLOEBAUM		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: sa209152@atsu.edu	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 4:37 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a medical student, I bring a unique perspective to the discussion surrounding the proposal for Advanced Practice Registered Nurses (APRNs) to gain independence from physician oversight in Missouri. Throughout my medical education, I have had the opportunity to witness firsthand the intricacies of healthcare delivery and the importance of collaborative healthcare teams in ensuring optimal patient outcomes. From my experiences in clinical settings, I have come to appreciate the invaluable role that physicians play in guiding and supervising healthcare practices. Physicians undergo extensive training and education, including four years of medical school followed by several years of residency, to develop the clinical expertise and judgment necessary to diagnose and treat a wide range of medical conditions. This rigorous training equips them with the skills needed to provide effective oversight and mentorship to other healthcare professionals, including APRNs. In contrast, while APRNs undergo rigorous education and clinical training, their programs typically do not include the same length of residency as physicians. Additionally, it's worth noting that the educational format for medical students is predominantly in-person with hands-on learning experiences. This ensures that medical students receive comprehensive training that emphasizes practical skills, clinical judgment, and direct patient care interactions. Conversely, APRN education programs may offer more flexibility and can sometimes be completed entirely online. While online education provides accessibility for aspiring healthcare professionals, it may not always fully replicate the hands-on clinical experiences and direct patient interactions that are integral to medical education. The collaborative relationship between physicians and APRNs fosters a dynamic healthcare environment where knowledge sharing, consultation, and teamwork are fundamental to addressing the diverse needs of patients. Granting APRNs full independence from physician oversight could potentially compromise patient safety and quality of care. While APRNs undoubtedly bring valuable skills and expertise to the healthcare team, the oversight and guidance provided by physicians serve as critical safeguards against errors, misdiagnoses, and adverse outcomes. Furthermore, the prospect of APRNs gaining independence may incentivize corporate healthcare entities to prioritize cost-cutting measures over patient care. Given the potentially lower salaries and overhead costs associated with employing APRNs compared to physicians, corporate healthcare companies may be more inclined to hire APRNs as a cost-saving measure. However, the substitution of physicians with APRNs in certain settings may lead to concerns regarding the quality and continuity of patient care. As future healthcare professionals, it is incumbent upon us to prioritize the well-being of our patients above all else. Upholding the principles of patient safety and quality care requires us to advocate for policies that promote collaborative practice models and uphold the highest standards of professionalism and clinical excellence. In conclusion, I urge policymakers in Missouri to carefully consider the potential implications of granting APRNs full independence from physician oversight. By preserving the collaborative relationship between physicians and APRNs, we can uphold the principles of patient-centered care and ensure that all

individuals have access to safe, high-quality healthcare services.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: LUKE OLDHAM		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: sa208244@atsu.edu	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 4:02 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

As a current medical student, I am dedicating many years learning to be a physician. I believe allowing APRN's to practice independently will result in subpar care, and will cause poor patient outcomes. I do not think this bill should be passed.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MATTHEW DILLE		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: dille.matt@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 2:44 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a student physician watching bills the increase the independence of nurse practitioners scares me. After 4 years of medical school and another 3-5 years of monitored training can I practice independently. This results in roughly 12,000 - 16,000 hours of training. While nurse practitioners only require 500 - 750. I am working to provide the highest quality healthcare possible to future patients. Would allowing nurse practitioner independence help provide quality healthcare to patients. I would argue this would result in unsafe medical practices.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: MICHAEL R. BROWN, DO		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: michaelmed@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 11:34 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a practicing physician in a rural area for over 15 years in the state of Missouri I have had the chance to work with many different APRNs, they can be an excellent part of a team, but in my experience still benefit from the supervision of a physician. From the very first day of medical school a physician is taught to lead and guide the medical care of a patient, this starts in the libraries and lectures halls for at least two years and then requires two more years of clinical education rotating every month in a different specialty. All of this happens after getting a four-year undergraduate degree. At that point if you asked any medical student getting their diploma and first being call Doctor, not even one would ever tell you they are ready to practice by themselves. This is why we require more than 10,000 hours of post graduate secondary training in a medical residency. It takes more than 10,000 hours to get the necessary experience to be able to tell the difference between all of the complex issues a patient may have, what is really sick, what is not and what is the best way to treat that disease. It is true there are simple and easier types of disease to treat that require a little less training, but it's that training that lets us know what is the simple versus the complex disease. For myself, my family members, and for my own patients I want to ensure that anyone providing them medical care has the necessary experience and training to know those key differences and have the appropriate time tested training. The current Missouri model allows an APRN who does not even have a fraction of that experience to be joined in a team with a physician who does. This allows a safe model of team-based practice, to remove the APRN from that team and provide independent practice rights you are removing them from access to that experience and removing your patients from having that experience available to them as well. I appreciate your consideration on this issue.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: MIKAYLA LEBO		PHONE NUMBER: 573-636-5151	
BUSINESS/ORGANIZATION NAME: MSMA		TITLE: MEDICAL STUDENT	
ADDRESS: 113 MADISON			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65102
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: MORGAN STEWART		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: mwatsonstewart@gmail.com		ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 5:06 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

As a medical student and future physician I understand the intensity and depth of knowledge that is required to be granted a medical license and ultimately the ability to practice independently. While APRNs are of extreme value in the field of healthcare, their formal education is far less significant than that of physicians who are trained to practice independently throughout the entirety of their education. As a student doctor, we deeply explore the intricacies of the human body including anatomy, biochemistry, immunology, embryology, pharmacology, medical decision making, etc for the entirety of our first two years of medical school followed by an intense and rigorous period of clinical rotations for another two years. The four years of medical school include 2 separate national medical board examinations. Following that, we have a required additional 3-7 years of training and another set of extremely challenging written and oral board examinations to even be eligible to practice medicine without supervision. I do not believe that the education received by RNs, APRNs, CRNAs, etc to be sufficient enough to grant the privilege of providing medical care to patients without an overseeing physician to assume responsibility of patient care outcomes. The depth of formal textbook/classroom education and board examinations are designed to teach and assess an entirely different realm of patient care when compared to the education, teaching, and board examinations of physicians. I urge you to consider the implications of disrupting the educational paths to careers in healthcare and how doing so has the potential to further worsen the nursing and physician shortage we face in Missouri and America as a whole.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: NATALIE ABERT LONG		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: nabert28@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 1:20 PM	

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

As a board certified family medicine physician, I would like to express my opposition to HB 1773. APRNs are important members of the health care team. However, their role is best achieved in collaboration with a physician. Outside of telehealth, proximity within the health care team is important so that the attending physician is able to better participate and collaborate with the APRN. This allows the supervising physician to more readily participate in patient care and provide ongoing education and training to the APRN. Eliminating mileage restrictions will not improve patient care or access within rural communities. APRNs typically practice in suburban or urban areas and are not the solution to the rural health crisis. Expanding mileage will not help with this. Additionally, there is a vast difference in education and training between physicians and APRNs. Considering independent practice after 2000 hours is unrealistic. It is unreasonable to expect competence in this time frame. Most medical doctors have completed between 12,000 and 16,000 hours of patient care experience before completing their medical training and beginning independent practice. Residency training is extremely regulated and monitored which also differs from the types of nurse training (many online and with limited patient care exposure). Putting patients at risk of harm is inevitable if APRN scope of practice is expanded in this fashion. I strongly oppose this bill. Focusing efforts on expanding the physician rural workforce (like with the primary care residency expansion) and supporting pipeline programs that identify medical students interested in rural medicine and providing scholarships and incentives will be much more productive in improving health care in a disadvantaged patient population than allowing undertrained and unprepared APRNs to practice independently. (My words are my own personal opinion.)



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: NICHOLAS MAYER		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: nmayerm@sbcglobal.net	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 6:27 AM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

To whom it may concern. I am a physician representing the American Osteopathic Association (AOA) and the American Medical Association (AMA). I am writing about HB 1773 and other similar such bills. Nurse practitioners (NPs) are nurses that have gone back to school for about 1 year and then followed a physician for about 700 hours of clerkships. The schools are not standardized and the clerkships are often loose with little direct training. To learn how to make an assessment and plan for taking care of illness, a physician sits for 4 years of graduate school (medical school) after college and then 20,000 hours of hands on training in medical residency. NPs play an important role in the health care system empowering physicians to reach and care for more patients, but that role is as an extension to a physician. NPs simply haven't been trained to make an assessment and treat people without daily help from a doctor. As a physician that works with and supervises nurse practitioners every day, I understand they have become an important extension to physicians, but do not have the depth of knowledge that would allow them to adjust their assessment and plan to particular patients or to innovations in practice. This collaborative practice has been appropriate and worked well to safely extend the reach of a physician while guaranteeing a standard of medical care. The board of healing arts sets a standard so that when you see a healthcare professional for a problem, you can expect a certain level of care and professionalism. Physicians along with all other health care professionals like physician assistants, physical therapists, athletic trainers, and speech pathologists are supervised by the board of healing arts. NPs are supervised by the board of nursing. Nurses do not make assessments and plans and therefore the board of nursing is not able to hold a NP to the same standard of care that is expected of everyone else who is supervised by the board of healing arts. If changes are to be made, the AOA and AMA would ask you to support an APRN license under the Board of Healing Arts and not under the Board of Nursing. No only will this HB 1773 and other like it threaten the standard of care you expect when you go to a clinic or hospital for medical care, it will make Missouri a more difficult place for physicians to practice, which will ultimately reduce access to physicians in this state. Weakening the collaborative practice agreement increases the risks to physicians as they are the ones ultimately held accountable. One may argue that the physician should set their own work arrangements, but most doctors are employed by massive health systems with monopoly powers who can tell doctors what they will or won't do if they wish to remain employed. Sincerely, Nicholas J. Mayer, D.O.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: PATRICK NAKASHIMA-MORAN		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: pat.nakashimamoran@gmail.com	ATTENDANCE: Written		SUBMIT DATE: 2/5/2024 9:17 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I am in opposition to this bill. I am a physician, completed a residency in Missouri, and licensed in Missouri and Illinois. During residency, I worked anywhere from 40-80 hours a week, or 2000-4000 hours a year, for three years, and I had direct supervision available during my training. So, after four years of medical school and a minimum of 6000 hours (usually more like 10000), I could finally independently practice medicine. This bill would allow an Advanced Practice Registered Nurse (APRN) to independently practice after less than a year of collaboration, and this collaboration is not necessarily in the same field they will practice or with direct supervision. I work with APRNs who have been practicing in collaboration, and there is no clinic day I do not get questions on how to treat a patient. I have had friends who have been seen by APRNs who have not received appropriate care for their conditions, and they are just referred to specialists who are hard to make appointments with, further increasing the cost of care and delaying appropriate care. One of the primary ways physicians learn is "see one, do one, teach one," allowing them to become proficient in practicing medicine. This takes time, exposure and direct supervision. This bill would remove these, lowering the quality of care that is provided to patients.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: PAUL D RAINS		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: prains@gmail.com	ATTENDANCE: Written		SUBMIT DATE: 2/5/2024 3:26 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

Nurses need the oversight of physicians. Proximity is part of the oversight. Nurses must never practice medicine on their own. They are poorly trained for this and ill-equipped. To protect the public, they must at most be an extension of a physician's services. To practice on their own is dangerous for Missouri citizens.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: PRESTON HOWERTON		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: pbhowie@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 7:11 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

Allowing unfettered and uncollaborative practice of an APRN after only needing 10% (20% if meds prescribed) of patient encounters reviewed is not nearly enough oversight to then set them loose. Their education and training is not comparable to that of a residency trained physician who had years of scrutiny by other physicians before being allowed free practice. I stand opposed to this proposed action as it is outlined in this bill. If the goal is for them to be unsupervised, then a more formal education process needs to be instilled into their training. As it stands now, they can do their clinical training with a friend who would be hard pressed to give constructive criticism to their clinical acumen



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: RICH AUBUCHON		PHONE NUMBER:	
REPRESENTING: MO MEDICAL SOCIETY		TITLE:	
ADDRESS: 112 E HIGH ST			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
REGISTERED LOBBYIST:			
WITNESS NAME: RYAN DEBOEF		PHONE NUMBER: 573-635-6944	
REPRESENTING: MISSOURI ASSOCIATION OF OSTEOPATHIC PHYSICIANS AND SURGEONS		TITLE:	
ADDRESS: 1423 RANDY LN.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65101
EMAIL: ryan@hahndeboef.com	ATTENDANCE: In-Person	SUBMIT DATE: 2/7/2024 4:20 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: STEPHANIE AGABEKYAN		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: stephanieagabek@atsu.edu	ATTENDANCE: Written	SUBMIT DATE: 2/7/2024 12:55 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

for nurse practitioners to practice independently would cause massive harm beyond comprehension. it's almost as difficult to comprehend how someone with little training and expertise can assume the role of a physician's tedious and rigorous journey to become certified. that's close to 20,000 hours vs under 1,000 hours. would you feel safe?



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: STEVEN EBERS		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: stevendebers@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 11:02 PM

THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.

Honorable Members of the Legislative Committee,As a concerned citizen and healthcare professional, I am writing to express my strong opposition to the proposed bill that seeks to remove collaborative practice agreement requirements for some APRNs and the geographic proximity requirement for collaborative practice arrangements between advanced practice registered nurses (APRNs) and collaborating physicians.The current requirement for APRNs to maintain geographic proximity to collaborating physicians serves as a crucial safeguard for patient safety and quality of care. It is important to require geographic proximity, as there are times that patients need physician consult quickly. If there is no geographic proximity requirement, this safeguard for patients disintegrates. Collaborative practice arrangements facilitate effective communication, consultation, and coordination of patient care between APRNs and physicians. If this is executed properly, it enhances patient access to healthcare and ensures patient safety. By removing this requirement, we risk compromising the continuity and effectiveness of patient care, particularly in rural or underserved areas where access to healthcare services may already be limited. The provision in the bill that eliminates the mandatory collaborative practice arrangement for APRNs who have accumulated 2,000 documented hours of practice or have received licensure by endorsement raises significant concerns. While APRNs undergo education and training, the collaboration with physicians ensures access to their expertise, especially in complex cases or emergencies. Removing this requirement may undermine the interdisciplinary approach to healthcare delivery and diminish the level of oversight and supervision necessary for safe practice.It is important to have this safe guard, so that physicians will continue to be available for patient access, especially in rural or underserved areas. Unfortunately, in states where APRNs have full practice authority without collaboration requirements, healthcare facilities, especially when private equity is involved, are abusing this and replacing physicians with APRNs in such a way that patient access to very skilled and knowledgeable physicians is dwindling in order to save money. Every day physicians are being replaced by APRNs in these states. Access to physicians is critical to the health of Missourians. I am a Family Medicine trained physician practicing in rural Missouri. I perform outpatient, inpatient, emergency room, nursing home and hospice work. I work with APRNs in all of these facets of medicine. APRN's training, experience, and skill level varies significantly. In my experience, the best APRNs are the ones who truly know their limitations and appreciate the collaborative relationship and thrive with it. They see the value in it and how it enhances patient care. The reason for this is due to the significant difference in training between APRNs and physicians. Many nurse practitioner programs require only 500 clinical training hours. Physicians however, typically have approximately 14,000 clinical training hours or more for family medicine, emergency medicine, etc. The more specialized, the more hours physicians train, up to 27,000 hours or more for subspecialized physicians, such as neurosurgery, interventional cardiology, etc. This illustrates why it is so important to keep these highly skilled and knowledgeable physicians involved in patient care

and why collaborative agreements are so important. In healthcare, as a physician or an APRN, there is a common saying: "you don't know what you don't know". Physicians in general, have much more training, expertise and knowledge and it is critical to patient care and safety to keep these collaborative agreements intact. In conclusion, I urge you to maintain the geographic proximity requirement and collaboration requirements for APRNs. Patient safety and quality of care should remain paramount, and any changes to APRN practice should be made with careful consideration of their impact on healthcare delivery and outcomes. Thank you for your attention to this matter. Sincerely, Steven Ebers, MD



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: TODD D MCCLUSKEY D.O.		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: medman@centurylink.net	ATTENDANCE: Written	SUBMIT DATE: 2/6/2024 10:17 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

I am totally against NP's practicing independently in our state but if you as legislatures want to allow this and take on that liability then you need to classify them as medical providers and license them under the board of healing arts not the board of nursing. NP's would be practicing medicine as physicians do and should be held under the same rules as the other providers practicing medicine in the state.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
INDIVIDUAL:			
WITNESS NAME: VICTORIA DAMBA, DO		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME:		TITLE:	
ADDRESS:			
CITY:		STATE:	ZIP:
EMAIL: vdamba@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 5:41 PM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

This bill is inappropriate. As a Residency trained Family Physician I completed my 6000+ hours before I could practice medicine as a licensed physician in the state of Missouri. It does not make sense to me that you would allow a nurse to “practice medicine” with only 2000 hours of on the job training with a physician. I know, many times that time is not spent in direct contact with the physician, which decreases the educational component. I know many nurse practitioners and some of them are very good, capable and smart individuals. Many of them DO NOT want independent practice. I also know nurse practitioners that provide poor, not standard of care. I have seen nurses go from high school, through 4 years of undergrad college, then straight into an APRN program with no bedside nursing experience. I want to know what kind of standardized assessment is being done to make sure these individuals know what they are doing?? This would be vital to the safety of Missourians. The amount of time with a physician in this bill is ridiculously low.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: VINCENT SCHMIDT		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: vincent.schmidt@kansascity.edu	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 2:19 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I am in opposition to this because, as a medical student, I believe this could put a lot of patients at harm, especially patients that come in with more serious illnesses/disorders, in which nurse practitioners would not have enough education to handle.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input checked="" type="checkbox"/> IN OPPOSITION TO <input type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: WAYNE WOLF, D O		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: wwolf_3@yahoo.com	ATTENDANCE: Written	SUBMIT DATE: 2/5/2024 8:22 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

I'm a surgeon practicing in rural Missouri I've had experience working with several nurse practitioners. Unfortunately I do not believe they provide the same care that a physician does. I do not believe it is in the patients best interest to have them practicing individually even if they've had 2000 hours of supervision by a physician.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input checked="" type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: ALICIA PLEMMONS		PHONE NUMBER:	
BUSINESS/ORGANIZATION NAME: KNEE REGULATORY RESEARCH CENTER		TITLE:	
ADDRESS:			
CITY: MORGANTOWN		STATE: WV	ZIP: 26506
EMAIL: joana.dasilvagonzalez@mail.wvu.edu	ATTENDANCE: Written		SUBMIT DATE: 2/5/2024 9:41 AM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			

February 2nd, 2024 Missouri House of Representatives Dear Chair Hardwick, Vice-Chair Diehl and members of the Emerging Issues Committee: I appreciate the opportunity to comment on removal of geographic proximity requirements for collaboration agreements and pathways for full practice authority for advanced practice registered nurses in Missouri with significant amounts of experience (HB 1773). My name is Alicia Plemmons, PhD, and I am an assistant professor, research fellow, and coordinator for scope of practice research in the Knee Regulatory Research Center at West Virginia University. This comment is not submitted on behalf of any party or interest group. My research studies patient outcomes in terms of safety, quality, cost, and access under different practice arrangements. Similar policies to HB 1773 in other states have resulted in: 1. Increased rates of nurse practitioners moving into the state with full practice authority and a reduction of nurse practitioners leaving the state due to lack of job autonomy. 2. Reductions in 30-day readmission resulting in overnight hospital stays or emergency room visits, as more primary care services are utilized. 3.

Reductions in healthcare amenable deaths, with the largest reductions in rural areas and elderly populations. Missouri has over 354 total primary care health professional shortage areas as of December 31st, 2023. This means nearly 79 percent of Missouri residents live and work in areas that do not meet safe provider ratios, particularly in rural areas. The U.S. Department of Health & Human Services estimates that meeting the needs of these residents will require at least 600 new primary care providers . Both removing the geographic proximity requirement and allowing nurse practitioners and other advanced practice registered nurses to practice without expensive additional contracts after a significant amount of experience, and to the fullest extent of their training, is a pathway the research finds to be effective in addressing this deficit without endangering the safety and quality of care provided to patients. In summary, the proposed removal of proximity requirements in collaboration agreements and pathways to full practice authority for advanced practice registered nurses with significant experience represents an improvement for access to healthcare for the great residents of the Show-Me State. Best regards, Dr. Alicia Plemmons, Assistant Professor of General Business Coordinator and Research Fellow, Knee Regulatory Research Center Alicia.Plemmons@mail.wvu.edu
 1. <https://doi.org/10.1007/s12122-020-09308-1> 2. <https://www.tandfonline.com/doi/full/10.1080/13504851.2021.1980486> 3. <https://www.sciencedirect.com/science/article/abs/pii/S004727272300083X> 4. <https://data.hrsa.gov/default/generatehpsaquarterlyreport>



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024
COMMITTEE: Emerging Issues		
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input checked="" type="checkbox"/> FOR INFORMATIONAL PURPOSES		
WITNESS NAME		
INDIVIDUAL:		
WITNESS NAME: ANITA WEST, FNP		PHONE NUMBER:
BUSINESS/ORGANIZATION NAME:		TITLE:
ADDRESS:		
CITY:		STATE: ZIP:
EMAIL: anitawest32@gmail.com	ATTENDANCE: Written	SUBMIT DATE: 2/4/2024 12:14 PM
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.		

As a Nurse Practitioner, my ability to fully provide care is limited by my ability to have a collaborator and also limited by not being able to practice to the full extent of my education. I've been an NP for 13 years, and still need a doc to sign off on my work like I'm a resident. He doesn't even review it. He just signs. Then he charges my company \$3000/mo to do that. I take call. I manage the patients. It's crazy and needs to change. These costs are for no reason other than to line the doctor's pockets, but the patients suffer.



MISSOURI HOUSE OF REPRESENTATIVES
WITNESS APPEARANCE FORM

BILL NUMBER: HB 1773		DATE: 2/7/2024	
COMMITTEE: Emerging Issues			
TESTIFYING: <input type="checkbox"/> IN SUPPORT OF <input type="checkbox"/> IN OPPOSITION TO <input checked="" type="checkbox"/> FOR INFORMATIONAL PURPOSES			
WITNESS NAME			
BUSINESS/ORGANIZATION:			
WITNESS NAME: WESLEY SUTTON		PHONE NUMBER: 573-508-4832	
BUSINESS/ORGANIZATION NAME: MISSOURI DIVISION OF PROFESSIONAL REGISTRATION		TITLE: DIRECTOR OF BUDGET & LEGISLATION	
ADDRESS: 3605 MISSOURI BLVD.			
CITY: JEFFERSON CITY		STATE: MO	ZIP: 65109
EMAIL:	ATTENDANCE:	SUBMIT DATE: 2/7/2024 12:00 AM	
THE INFORMATION ON THIS FORM IS PUBLIC RECORD UNDER CHAPTER 610, RSMo.			